

**THE ROLE OF DOCUMENT REVIEWS IN HEALTH POLICY ANALYSIS  
AMONG LOW AND MIDDLE-INCOME COUNTRIES: A SYSTEMATIC  
REVIEW**

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## Section 0: Preamble

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*For my loving and supportive family: Dad, mum, sisters, husband, and son*

## **Abstract**

Health policy analysis (HPA) contributes to the development and understanding of policies and their implementation that in turn helps to strengthen health system reforms. Empirical evidence indicates that a substantial number of policy analysis studies conducted in low and middle-income countries (LMICs) are informed by non-interactive methods such as document reviews, alongside interviews, focus group discussions, and observations. In most HPA studies, document review features as one of the methodologies used in conducting policy analysis, especially in retrospective policy analyses. However, less is known about how and why document reviews are adopted in health systems research (HSR), HPAs in particular. While efforts have been made to look into some of the methodologies that inform health policy analyses for LMICs in recent years, there is a dearth in knowledge specific to document reviews and how they fit in the framework of doing health policy analyses. This paper provides findings from a qualitative systematic review of peer reviewed policy analysis studies indicating the role of document reviews; why it is employed and how this methodology is positioned and motivated for in the LMICs.

This dissertation is presented in three parts.

Part A is a review protocol outlining the background and methodology for this review. An outline of objectives and approaches to systematically achieve these objectives is elaborated in this section. Defined key terms, inclusion and inclusion criteria as well as quality assessment tool to facilitate the selection of appropriate documents before they are subjected to a thematic analysis, is also provided.

Part B is a literature review of peer reviewed work done on the use of document reviews in HSR. More focus is put on literature that speaks to general use of documents in HSR which is then narrowed down to their use in a component of public policy thus HPA. In this view, data from HPA studies previously done in LMICs (1994-2007) is reviewed and summarised to develop a basic understanding of the role of document reviews in HPAs among LMIC. This builds the basis for the systematic review presented in part C. The use of a model is adapted to help understand how documents are used in health research and linking these concepts to how documents are used in HPA studies.

Part C begins with the background to the review and the methodology section. Following the review of all HPA studies done from the year 2008 to 2016, results are presented and discussed before its conclusion. This builds on the knowledge obtained from the broader literature as well as the 1994-2007 review, with more attention given to the role of document reviews as a common data collection method adopted in the respective reviews.

Results underscore the notion that document reviews are a laudable, scientifically sound methodology with a significant role in contributing to HPA, thereby allowing more in-depth understanding of the context, process, content and application of policies. Furthermore, documents aid with policy analysis processes in gauging policies' current state during the time of the analysis. Apart from validating information obtained from other data collection methods, documents have also been noted to act as advocacy instruments in the health policy making field, where the existence of many documents in support of certain policy issues seem to have an advocacy function, as it alerts policy makers and the public to the presence or importance of the policy issues. However, the results do not explain why most policy analysts fail to fully document, display and give full details of documents used in policy analysis studies to demonstrate how document reviews are positioned and motivated for. It is therefore worthwhile a study to conduct and examine these concepts.

This review has potential to increase methodological knowledge in the health policy and planning domain. The results provide a better understanding to the approach HSR can incorporate document reviews. Additionally, results from this dissertation will enhance the understanding of document reviews and provide policy analysts and other health systems researchers options to adapt this methodology in ways that will broaden and strengthen health systems research (HSR) as well as identifying other avenues for further research.

## **Acknowledgements**

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## Plagiarism Declaration

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University of Cape Town, July 2018

## **Dissertation Contents**

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*Part A: Review Protocol*

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*Part C: Journal Manuscript*

## **Acronyms and Abbreviations**

<b>LMIC</b>	Low and middle-income countries
<b>HPV</b>	Human papilloma virus
<b>ISHP</b>	Integrated school health program
<b>HPSR</b>	Health policy and systems research
<b>HSR</b>	Health systems research
<b>CASP</b>	Critical appraisal skills program
<b>HPA</b>	Health policy analysis



## Part A: Review Protocol

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## Introduction

Health policy analysis (HPA) has been described as fundamental for health systems reforms as they allow the explanation of the interaction between institutions, policymaker ideas and interests, as well as the actual policy process (Walt et al. 2008a). Based on these statements, many scholars have undertaken HPAs for various reasons. These range from explaining the political dimensions of public policies, analysing stakeholders' behaviours or simply exploring the theoretical frameworks involved in policy processes (Walt et al. 2008a). Each of the above-mentioned reasons remains vital to health systems reforms as their evaluative processes contribute significantly to effective policy changes.

*"Policy analysis is a set of techniques and criteria which is used to evaluate public policy options"* (Jenkins-Smith 2001). It is also used to rationalise policy development and implementation, as a means to greater efficiency in public resources allocation (Jenkins-Smith 1990). A policy analysis can be done either through qualitative or quantitative methods, or a combination of both (mixed methods approach), whereby Key Informant Interviews (KII), Focus Group Discussions (FGDs) and observations are employed for the former and surveys plus other statistical analyses are done in the latter (Robson 2002). The purpose of the policy analysis, availability of resources (time, human and financial) and area of interest determine whether a retrospective or prospective policy analysis should be conducted (Bobrow & Dryzek 1987). Retrospective policy analysis is usually descriptive as it looks back at policy experiences; why or how a policy made its way onto the agenda, whether its objectives were achieved or not, as well as the content of the policy (Buse et al. 2012). A retrospective HPA, using a qualitative approach, with the use of document reviews is, therefore, well suited than prospective HPAs which usually look into the development or amendment of new policies and are prescriptive in nature (Hambrick Jr 1998). It is argued that while it is useful to carry out both retrospective and prospective data analyses, retrospective approaches are usually preferred as they are typically constructed from readily available data which makes the process convenient for researchers.

Interestingly, most HPAs conducted in the low and middle income countries (LMICs) have been informed through a combination of interactive data collection methods such as

interviews, focus group discussions (FGDs) just to mention a few, with key study informants (whether insiders or outsiders) acting as major sources of information in guiding the analyses (Gilson & Raphaely 2008). Despite being some of the laudable means of informing policy analyses, these primary data collection approaches are not always feasible. This may arise from time and resource constraints especially when policy analyses are being conducted in low resource countries (Gilson & Raphaely 2008). Given the pressing demands of policy environments at times, doing policy analyses through secondary research such as document reviews might be the only option available to policy analysts.

Document review is one of the methods that use secondary data and is described as *the systematic analysis of both printed and electronic material in order to elicit meaning, gain empirical knowledge and understanding about a phenomenon* (Corbin & Strauss 2008). It is widely used as a supplementary methodology to primary data collection in qualitative research, not only in the health field, but also in social research and hence a credible methodology (Mogalakwe 2009).

While there have been efforts, in the past, to look into the methodologies that inform HPAs in LMICs (Berlan et al. 2014; Erasmus 2014; Erasmus et al. 2014; Gilson 2014; Gilson et al. 2014; Walt & Gilson 2014), there is proportionally less literature on specific methodologies such as document reviews and how they fit into the frameworks of doing HPA. Document reviews are widely used in HPAs, either as stand-alone method or sometimes as a supplementary to other data collection methods. Buse et al. (2012) ascertains that evidence for policy analysis stems from documents as well as people, understanding how to incorporate this data collection method into HPAs, its pitfalls and the opportunities it provides health policy analysts, is worth investigating. This study therefore will explore and examine how document reviews are positioned, motivated for and executed in policy analyses, particularly HPAs done in the LMICs.

## **Background**

Since the 1990's there has been an increasing popularity around the use of evidence-based research to guide decision-making in the health systems (Walshe & Rundall 2001). However, health systems research (HSR) in the LMICs is still in its infancy, leading to under-availability

and utilisation of evidence in informing HSRs (Gilson & Mills 1995). This presents a significant gap, as LMICs have greater disease burdens and would benefit from evidence-based research to guide interventions and strengthen its health systems (Gilson & Mills 1995). With regards to HPAs specifically, some authors reflect on how policy analysis in LMICs lack focus on the processes involved in developing and implementing policies, and seem to focus primarily on policy design and content (Walt & Gilson 1994a). Given that public policies are influenced by political institutions, public bureaucracies and other social processes, it is important to consider all these dimensions in policy analyses (Parson W, 1995).

Some of the reasons for substandard outcomes of policy analyses have been attributed to the analysis methods adopted in carrying out policy analyses. In a detailed review of health policy analyses in LMICs over a 13-year period, the authors indicate that most policy analyses in the LMICs usually lack detailed description of methods and do not provide adequate information about the documents from which policy analyses' conclusions are derived (Gilson & Raphaely 2008). The authors further posit that the choice of appropriate methodologies in conducting policy analyses in LMICs contributes to substandard policy analysis outcomes in LMICs (Gilson & Raphaely 2008). With respect to document reviews in particular, an important contribution to these methodological deficits is the lack of experience of researchers in selecting documents and in robustly reviewing documents as part of these policy analyses.

Literature from various disciplines indicates that policy analysts have in the past used document reviews and continue to use secondary data for research purposes (Dunn 2015; Fitzgerald 2012; Freeman & Maybin 2011). From the above statements, it is apparent that document reviews are a commonly used secondary data collection method. In instances where primary data collection is not feasible, particularly in HPA studies, adequate detail on how document reviews are applied is required. However, besides all other approaches to resolving the methodological deficiencies associated with doing policy analyses, document reviews have been sparingly mentioned as a potential re/solution that could contribute to robust health policy analyses. It is, therefore, important to reflect on the data collection

methods that inform policy analyses, such as document reviews, to be able to determine how far this method informs policy analyses in both public and private domains.

## **Inspiration behind the study topic**

Initially the researcher had intended to examine how the Human Papilloma Virus (HPV) policy had arrived on the South African policy agenda and how the policy evolved in relation to the broader integrated school health policy (ISHP). This was of particular interest to her due to her background in cancer care. The aim of the policy analysis was to describe experiences and challenges in the implementation of the ISHP after the integration of the HPV vaccination policy. It also aimed at identifying the key policy issues and actors involved in the HPV vaccination policy making process as well as providing possible recommendations for a more effective policy implementation upon completion of the study.

This study was going to employ a retrospective policy analysis, through the review of policy documents (primarily South African government sources and comprehensive media reviews) related to the HPV vaccine and ISHP policy, given time and resource availability. As put by Bobrow and Dryzek (1987), *retrospective policy studies present several strikingly different yet equally compelling explanations of historically observed set of policy outcomes without providing grounds for choice between alternatives*. These aspects seemed well suited for the analysis as this policy was relatively in its early stages of implementation. However, through the initial search for relevant policy documents, it became clear that these were sparse and not sufficient for the original intention. This prompted the researcher to think more critically about the use of document reviews in conducting HPAs; the sparsely available documents made the researcher wonder how often documentary reviews are used in HPA studies and whether documents in other HPAs had been sufficient, given that very few relevant documents were found for the HPV policy, and finally what kinds of documents other researchers use in conducting HPAs.

It is the researcher's expectation that while this exercise might help to answer the overall question on the role of document reviews in health policy analyses for LMICs settings, it will also satisfy her original question of assessing whether this method would have been the best fit for analysing the HPV vaccination policy in South Africa.

## **Review question**

What is the role of document reviews in informing health policy analysis in LMICs?

## **Subsidiary review question**

How and why are document reviews employed in health policy analysis in the LMICs?

## **Objectives of the review**

1. To identify, evaluate and synthesise policy analysis studies that used document reviews as a data collection method.
2. Identify the kind of documents used in health policy analyses.
3. Describe the purposes for which document reviews have been used in health policy analyses.
4. To examine the extent to which document reviews have aided in the understanding of policy context, content, actors and process.
5. Make suggestions of how to strengthen the use of document reviews in health policy analyses.

## **Definition of key terms**

For the sake of clarity, the following definitions and terminologies have been further defined in a manner that is applicable to this study.

### **Public policy**

As put by Masotti and Lineberry (1976), there are so many competing definitions of the term “public policy”. With this in mind and for the sake of this research, the following definitions of public policy will be applied: “A set of interrelated decisions taken by political actors or groups of actors concerning the selection of goals and the means of achieving them within a specified situation where those decisions should, in principle, be within the power of the actors to achieve” (Jenkins 1978).



Another simple definition that resonates with the definition above clarifying the terminology used in this study is given by Cochran and Malone (1995): “A set of political decisions for implementing programs to achieve societal goals”.

### **Health policy**

Decisions, plans and actions that are undertaken to achieve specific health care goals within a society (World Health Organisation). It defines a vision for the future by outlining priorities and expected roles of different groups and builds consensus in informing people.

### **Policy analysis**

A technique used to examine and evaluate the available options to implement the goals of selected goals. It helps determine which of the various policies will achieve a given set of goals in light of the relations between the policy goals (Geva-May & Pal 1999; Nagel 1999). Other simpler definitions include the one by Cochran and Malone (1995) that describe policy analysis as *“an investigation that produces accurate and useful information for decision makers”*. For the sake of this study though, the following definition will be adapted: *“a set of techniques and criteria with which to evaluate public policy options and select among them, to rationalise the development and implementation of public policy and as a means to a greater efficiency in allocation of public resources”* (Jenkins-Smith 1990).

### **Retrospective versus prospective policy analysis**

Retrospective policy analysis is usually descriptive as it looks back at policy experiences; why or how a policy made its way onto the agenda, whether its objectives were achieved or not, as well as the content of the policy (Buse et al. 2012). On the other hand, prospective analyses look into new policies and hence they are prescriptive in nature as the analyst may be involved with formulation of the policy and proposals (Hambrick Jr 1998).

### **Document**

Scott (1990) defines a document as *“an artefact which has text as its central feature”*. For purposes of this study the researcher will refer to document as an official paper relied on for proof, or in support of something and as a writing conveying information whether produced by an individual for private purposes or an organisation or team for public use (Walsh 2014).

## Document reviews

Document reviews are a way of collecting data by reviewing existing documents (Center for Disease Control & Prevention 2009). Payne and Payne (2004) describe this technique as a research methodology that is used to categorise, investigate and identify the limitations of other data sources. As this technique is done in a systematic procedure to review or evaluate printed or electronic documents (Bowen 2009), the terms 'document analysis' and 'documentary research' are sometimes used interchangeably with document review. For purposes of this study, the term document review will be used to define the processes defined above.

## Systematic review versus literature review

A systematic review is a structured process of review synthesis which attempts to bring together all empirical evidence be-fitting specific eligibility criteria in order to answer a particular question (Cochrane handbook for systematic reviews of interventions 2008). It follows a reproducible method and identifies gaps in knowledge to guide future research (Centre for Reviews and Dissemination 2008). Other authors (Cook et al. 1997; Higgins & Green 2011; Straus & McAlister 2000) have defined a systematic review as *"a retrospective approach to research which summarises individual studies done on particular areas of interest with the use of specific search strategies to synthesise and critically appraise literature in a scientific and systematic manner"*. As this fits well with the intention of this study, this methodology will be adopted to help achieve its aims.

On the other hand literature review is simply a process that accounts for what has been published by accredited authors or researchers on a specific topic without focusing on the methods used (Centre for Reviews and Dissemination 2008). This particular important step of every research will also be carried out to account for all studies done on document reviews as a source of data to inform policy analyses.

## **Rationale for review**

Mills (2012) points out how health policy and systems research (HPSR) methods help the alliance for health policy and systems develop worldwide programmes in capacity strengthening for LMIC researchers. This comes with the acknowledgement of the important role researchers play in helping countries improve their health systems. She continues to stress that it is essential to recognise the possible evolution of the health research process whereby research has diverted its focus from individuals and services they receive or provide (patients and health care providers) to targeting higher organisational and systems levels. Hence researchers must equally change their direction of enquiry into trending issues. An example of such is through conducting health policy analyses.

Policies have a major role in the health system and by enquiring how these policies are formulated, implemented and evaluated can lead to health systems strengthening strategies (De Savigny & Adam 2009; Walt et al. 2008c). This is mainly achieved through policy analysis practices. Several reasons underlie the existence of policy analyses. Firstly, policy analyses lay the grounds for health systems reforms as they highlight how a policy issue and its content came into existence, how it was implemented or why it was not implemented thereby illuminating the past mistakes for improvement in future policies (Walt & Gilson 1994a). Secondly, policy analyses have aided the justification and interpretation of implemented innovations to the society (Jenkins-Smith 1990). Last but not least, is the ability to explain the behaviour of both policymakers and consumers, and the context in which policies are formulated and implemented (Walt et al. 2008b). To effectively produce policy analysis results that are worth the consideration for health systems reforms, however, robust methodologies in the policy analysis process are a prerequisite.

Fulop (2001) points out how HPSR (under which policy analysis is a component) and its methodologies are more established in the northern countries (UK, Northern America and others) than in developing countries. Additionally, Gilson and Raphaely (2008) highlights how the lack of methodological diversity in LMICs contributes to the slow growing HSR culture. Attributed to this slow growing culture of HSR also is conflict, which extends to low resources and unstable policy environment making it difficult to carry out HSR. All these factors explain why HSR in LMIC have mostly relied on and highlighted the use of primary

data collection, rather than randomised clinical trials or non-interactive methods like document reviews as some of the LMICs and their health systems are affected by either of the above-mentioned factors. Most often than not, these methodologies have dwelt much on primary data collection approaches in doing policy analyses whereby in-depth investigations of a single phenomenon is done in its real life context (Yin 1994b). This is usually done through surveys, interviews as well as observations (Ragin & Becker 1992). Nonetheless, most High Income Countries (HICs) and their health systems have some commonalities and resonate with health systems in developing countries, and therefore policy analyses methodologies used in HIC are also used to inform research and policy analyses in developing countries. Nevertheless, adoption of these methodologies should be appropriately adapted, as LMICs have very different contexts, such as weaker data regulations, secondary to weak regulatory capacity for managing systems, unstable political systems as well as high dependency on external donor funding (Shiffman & Smith ; Walt et al. 2008c) all of which may influence the methodologies promoted in conducting policy analyses. Methodologies such as documentary reviews may be easier in these contexts, provided that such documents are readily available.

While primary data collection methods might have advantages over secondary data collection methods in their applicability to HPAs, it is important to know that policies are politically and socially constructed and that policy actors are not merely those who are intimately involved in the formulation and implementation of policies, but also beneficiaries of the policies (Fischer & Miller 2006). Accessing all key informants of a policy, who sometimes may withhold pertinent information about certain policies due to the meanings they attribute to the policy content, make primary research in the policy environment complex. Walt and Gilson (1994b) indicate how actors' values and interests have the potential to block or subvert policy discourses. Therefore, caution must be exercised when eliciting actors' perspectives in policy analysis, as the complexity of values and interests can potentially influence the conclusions one makes about particular policies.

Alternatively, other methodologies that deepen and extend the existing body of knowledge around policy analysis in LMIC can be undertaken. Secondary data collection, under which documentary reviews fall, has the potential to enhance rigorous synthesis of existing literature on policies to enhance the generation of new knowledge (Gilson et al. 2008a; Mills

2012; Walt et al. 2008c). They emphasize that *“increasing the methodological diversity within policy analysis by drawing more extensively on experiences from other fields whilst paying greater attention to benefits and limitations of these different methodological approaches will enhance reflexivity and improve relations between researchers and policy actors and the manner in which policy analysis findings are used”*. Furthermore, the authors recommend that study designs should be made explicit in all policy analysis studies to improve efforts in building policy analysis capacity and analytical skills.

Despite all these recommendations and gaps identified in the methodologies mentioned, no systematic review has yet been conducted to evaluate the contribution of document reviews to health policy analysis. To the researcher’s knowledge, a detailed overview of the use of document reviews in LMIC policy analyses has not been done. In fact, the first methodological review of HPA methodologies in HPA studies from LMICs is the work published by Gilson and Raphaely in 2008, in which they conducted a thorough review on the use of the Walt and Gilson triangle as an analytical framework for HPAs in LMICs since 1994, the year in which the policy triangle was first published. Since then, several methodological reviews, examining the use of different methods used in LMIC HPA were conducted, drawing on the original database of studies used by Gilson and Raphaely.

The researcher has confidence that this review will contribute to the growing body of methodological literature in the field of HPA and lead to the understanding of the value and application of document reviews in conducting policy analyses.

## **Methodology**

### **Approach to the review**

The study will conduct a systematic review of the health policy analysis literature. It will focus on health policy analysis studies from LMICs that have employed document reviews as part of their methodology. The review will critically analyse the existing evidence found in these studies, in order to integrate this body of literature into a comprehensive overview of the use of document reviews in informing health policy analyses (Cooper 2016). To effectively achieve this, the review will take the approach as outlined below.

## **Systematic review**

A systematic review is understood to be methodologically retrospective, and that it synthesises individual studies. These studies usually have a particular query of interest, hence the use of a scientific strategy to search, critically appraise and synthesize available relevant literature (Higgins & Green 2008; McAlister et al. 2000).

As per recommendation by Higgins and Green (2008), a systematic review should follow a stepwise format, thus requiring planning the review, through to its conclusions and dissemination of the results. In the planning phase, it is where a researcher identifies the need for the review and generates a review protocol that outlines the review problem, the aim and objectives. The second phase of the review involves the formulation of a search strategy, conducting the searches using key search terms that have been identified and screening of the retrieved articles for relevance. What follows this step is a critical appraisal of the selected articles, before thematically synthesizing them (Tranfield et al. 2003). This exercise is called a systematic review. The last phase involves reporting and disseminating the research findings in a manner that is easily understood by all relevant stakeholders.

All these processes involved in carrying out systematic reviews can be done using quantitative methods, qualitative or mixed methods (Harden & Thomas 2005). Just as quantitative approaches require the establishment of consistency across different settings and studies, as well as improving reliability and accuracy of study conclusions (Akobeng 2005), so do qualitative systematic reviews (Noyes & Popay 2007b; Thomas & Harden 2008). In this study, given the nature of the research question, a qualitative systematic review will be employed, which will allow for a rigorous analysis and for the dissemination of the results in an unbiased way. This will be facilitated by following an explicit step wise approach in conducting the review, thereby promoting transparency and repeatability.

Methods for reviewing and synthesizing qualitative research are less well developed than those of analysing quantitative studies, with persistent debates on how best to synthesize qualitative research (Dixon-Woods et al. 2005; Thomas & Harden 2008). Despite these debates, most of the research work that is closely linked to this topic adopts qualitative

approaches of review synthesis (Gilson et al. 2008a; Gilson & Raphaely 2008). The two most commonly used approaches to synthesise qualitative systematic reviews are narrative and thematic analyses (Dixon-Woods et al. 2005; Mays et al. 2005).

Narrative data synthesis is commonly used in systematic reviews (Rodgers et al. 2009), as traditionally, narrative reviews are well suited for presenting findings from published studies without transforming the data for further analysis (Mays et al. 2005), but rather allow researchers to summarise and interpret the evidence. However, this approach promotes the inclusion of evidence from a wider variety of study types, thus facilitating the incorporation of diverse forms of evidence in systematic reviews (Mays et al. 2005; Rodgers et al. 2009). Despite its merit, this incorporation of diverse forms of narrative data from various sources may sometimes be challenging for researchers to consolidate and translate raw narrative data, in different forms, such as personal stories, into new knowledge. On the other hand, thematic synthesis enhances the researcher's capacity to draw conclusions across similar studies, based on the common elements identified (Lucas et al. 2007). This approach promotes easy identification of key and recurrent concepts, including their translation from studies. It further helps the researcher explore the differences and similarities of these concepts in various texts (Popay 2006). Thematic synthesis involves a line-by-line coding process whereby articles read, facilitate the identification and translation of concepts among texts and assist the researcher to come up with generic codes that encompasses all documents (Thomas & Harden 2008). These lead to formation of themes through categorisation of codes with similar aspects relating to a specific topic guided by objectives of the study (Aveyard H 2010; Mays et al. 2005).

### **Literature search strategy**

*"No individual database includes all articles related to specific topics"* (Hammerstrøm K. 2010). It is for this reason that several databases should be included in all literature searches, including for this particular study. Hammerstrøm K. (2010) also indicates that sometimes errors in categorisation of articles or unstructured abstracts may occur and interfere with the retrieval of other documents, especially during searches for non-medical terms. Additionally, the use of multiple databases also helps researchers prevent bias, even

though budget and time constraints also play a role and must be considered when setting out to do a literature search (Hammerstrøm K. 2010).

Given that health policy analysis in LMIC is still in its infancy, the researcher anticipates a limited number of health policy analysis studies to be available for inclusion in this review and this might limit the utility of this study. In this regard, some policy analysis studies that are outside the health systems field, but used document reviews to inform the analyses, might be included. Despite the mentioned limitations, it is the researcher's intention to make this review a useful first step towards establishing the utility and effectiveness of document reviews in informing health policy analyses.

Although, traditionally, systematic reviews usually address questions about the effectiveness of interventions (Hannes & Claes 2007), this review will not examine the effectiveness of the document review methodology in health policy analyses. It will limit itself to whether and how documentary reviews have been or are applied in HPA.

This process will include a thorough, objective and reproducible search as recommended by Lefebvre et al. (2008), to ensure that a wide range of databases are searched. These databases will include Scopus, Africa Wide, PubMed, International Bibliography of Social Sciences and Web of Science. Search terms will include the following key words; 'document review', 'policy analysis', 'health policy', and 'LMICs' as well as other variations of some of the search terms like 'documentary research' and 'document analysis'. This combination will enhance the effectiveness of the literature search (Bown & Sutton 2010). These searches will be limited to articles published from the year 2008 to 2016 (the period following that used in the Gilson and Raphaely study), with focus on health policy analysis studies done in the LMIC. The database used in the Gilson and Raphaely study will be drawn on in the literature review, to help shape the research questions, as well as the deductive themes that will be employed in this study. Iteratively, studies identified from the citations of the selected articles will also be included if they meet the inclusion criteria.

The Hammerstrøm K. (2010) guide for a systematic way of retrieving information from articles will be used to inform this systematic review. As recommended by Lefebvre et al. (2008), an academic librarian or information specialist should be consulted for assistance with clarifying and finalising the search terms. With the librarian's assistance, limiting



commands to select only articles with the relevant information, time periods, locations of interest and language will be used to further refine the search. Being aware that too many limiting commands may greatly increase the risk of bias (Hammerstrøm K. 2010), only language, location and year of article publication will be considered as limiting factors. The operator 'OR' will be used to separate search terms 'AND' to join them and 'NOT' to exclude other policy analysis studies not linked to health and countries not qualifying as LMICs. To avoid the unintentional exclusion of relevant documents, this might be done manually during the search as the operator 'NOT' heightens the risk of excluding relevant records (Hammerstrøm K. 2010). The literature search is intended to end up into a list of peer reviewed articles. These will be included in an appendix through the use of a database worksheet on which the review and synthesis will be based (Kugley et al. 2016; Tranfield et al. 2003). For each search conducted, a search strategy will be recorded accordingly to search records retrieved and the numbers recorded in the 'results' section (Kugley et al. 2016).

## **Article Inclusion and Exclusion**

Inclusion and exclusion criteria ensure that the literature base and strict definitions of the criteria are able to generate adequate data and a meaningful combination of results, while trying to prevent a non-homogenous large database that is unmanageable (Bown & Sutton 2010). The inclusion and exclusion criteria (Table 1) for this study will predominantly be based on whether the article retrieved contains adequate, relevant and appropriate information on the document review component of the study, to aid in the achievement of the study aims. These will include and be limited to articles published between the years 2008-2016 to ensure that the review report accounts for all the relevant health policy analysis studies that used document reviews in their methodology. Relevant health policy analysis studies will be included, but due to possible limitations in the documents retrieved, other policy analyses that are outside the health field may be included. These articles may have used the document review as a sole method for conducting a policy analysis or as a supplementary method. Snowballing and reference tracking will, therefore, be promoted to identify such documents.

**Table 1: Summary of inclusion and exclusion criteria**

<b>Issues to Consider</b>	<b>Inclusion Criteria</b>	<b>Exclusion Criteria</b>
Nature of Intervention	All documents with sufficient information on how document review was carried out to inform a health policy analysis in any of the LMICs will be included. Sufficiency of information will be determined through the quality assessment which has been elaborated in the section 'quality appraisal' below.	Do not discuss relevant findings on the use of document reviews in their full text but bits of information on document reviews. Are not policy analysis studies.
Geographic area	Health policy analyses conducted in LMICs with document review as its sole or supplementary methodology will be included.	Studies conducted in High income countries
Language of Publication	Only documents in English will meet the inclusion criteria to cover for resource constraints that might rise from the need to translate.	Are not published in English due to difficulties in translation which could be time and resource consuming. Are published prior to 2008 and later than 2016 for reasons explained in the rationale section.
Period of publication	All documents from the year 2008 to 2016.	Published prior 2008 and after 2016.
Study designs	Peer reviewed articles promoting all study designs will be included.	Theses and commentaries. Are policy analysis studies but used other methodologies other than document reviews to conduct the analysis.

Adopted from Hammerstrøm K. (2010)

All suitable articles will be selected based on the inclusion criteria. Duplicates will be screened and removed using a reference manager (EndNote X8). Following the removal of the titles and abstracts that are not relevant to the topic, full text reading of the screened titles and abstracts will be done. This will involve the supervisor to reach consensus on which of the selected articles are suitable for inclusion in the study.

## **Quality appraisal**

This will be done simultaneously with data collection. There have been disagreements regarding the best method of assessing the quality of qualitative studies by several authors (Chinchilli 2007; Dixon-Woods et al. 2005; Dixon-Woods et al. 2001). Due to these debates around quality appraisal of qualitative studies, a tool that intends to guide the judgement of suitable articles to be included in a systematic review was generated. This is known as the Critical Appraisal Skills Program (CASP) which contains ten appraisal questions that allow rigorous assessment of articles by reviewers (Harden & Thomas 2005; Noyes & Popay 2007a; Tranfield et al. 2003). The CASP, which will be adjusted to fit the purposes of this review will be used and is attached in appendix 3. During this exercise, studies will be assessed for appropriateness in the following areas; clear objectives and aims, data collection methods (which includes partial document review or entirely based on document review), study designs, clear description of documents used, clear and relevant findings obtained from document reviews, rigorous sampling strategy used in document selection and inclusion, author's comments and conclusions about the role of document reviews in informing their health policy analysis. All these points will be scored out of six. All articles that will score five points and above will be included. Those that score four points will be set aside for deliberation and might be included if they are deemed to contain valuable information regarding the use of documents in HPA studies. All articles scoring three points and below will be excluded. Appendix 4 illustrates how the summary from the assessment of the articles will be presented. As proposed by (Thomas & Harden 2008), systematic reviews that adapt qualitative approach of quality assessment facilitate the ability of selected articles to answer research questions more than systematic reviews that base their quality assessment on research designs. To promote rigour and transparency, this assessment will first be done by the researcher and then the supervisor to verify the quality of the studies included in the review.

## **Data Extraction**

Data extraction whereby a researcher decides what to abstract has proven to be a difficult task (Thomas & Harden 2008). The researcher anticipates that the initial review of literature will assist in identifying relevant themes that will help describe and classify the stages and processes involved in using document review while carrying out health policy analyses. In this regard, codes will be developed and refined throughout literature review and later data extraction. These codes are intended to form a basis for the analysis of articles that meet the inclusion criteria for this review.

A sample of articles will be looked into and assessed for quality before they are analysed, using the coding frame to test the appropriateness of the codes. This will be done together with the supervisor with whom agreement on any modifications on coding will be made. This will ensure that only articles of an acceptable quality are included in the review. The data extraction form (Appendix 5) will be used primarily to reduce bias as it will promote an organised representation of extracted data and act as a record for all data (Tranfield et al. 2003). This sheet is intended to aid in an organised categorisation of articles on health policy analysis, based on their location, year and methods used, as well as guide the analysis of data and its management. This is because data will be extracted and recorded in a summarised manner, to ensure the provision of a quick overview of the events that are involved when researchers use document reviews to carry out health policy analyses. The use of Miles and Huberman (1994) interactive model will also facilitate the examination of how HPA researchers report the use of documents in HPA studies and hence facilitating the extraction of relevant data. The model will be adjusted to meet the review's objectives.

Data recorded will include relevant verbatim quotes and texts, as well as the author's interpretation in the reviewed articles. As advocated by some authors (Bown & Sutton 2010; Tranfield et al. 2003), multiple reviewers as opposed to a single reviewer are essential, as it reduces error and bias. For this reason, the supervisor will monitor most of the review stages to provide the much-needed insight of how the review should be conducted. This is in accordance to other authors (Cooper 2016; Mouton 2012), who highly recommend that the data extraction process be carried out by more than one researcher so that codes generated by multiple coders are triangulated to ensure precision and validity of

information captured. Being aware of this notion, the researcher acknowledges the resource constraints and therefore will intimately involve the supervisor in the formulation of codes and review of selected articles to ensure only relevant information is entered into the coding sheet.

## **Data Analysis and synthesis**

Following the systematic search of literature will be the process of synthesizing and analysing of data, which will involve equal analysis of all materials included. As defined by Mays et al. (2005), synthesis involves the review of extracted evidence from various sources and bringing all those together. Thematic analysis will be adopted in analysing data for this review for the following reasons that use of thematic analysis enhances a researcher's capacity to draw conclusions across similar studies based on the common elements identified (Lucas et al. 2007). This approach will mainly be employed during the systematic literature review for easy identification of key and recurrent concepts including their translation from studies which will further help the researcher explore the differences and similarities of these concepts in various texts (Popay 2006).

Thematic synthesis will involve line-by-line coding process whereby articles will be read to identify information relating to the use of document reviews in HPAs. This is generally the first step in thematic analysis known as the coding process (Thomas & Harden 2008). The process is known to assist in the organisation of codes into descriptive themes that facilitate the task of synthesizing literature and translating study-specific ideas into generic concepts (Thomas & Harden 2008). These steps will lead to formation of themes through categorisation of the codes. With guidance from the study objectives, codes with similar aspects and closely related to document reviews will be grouped together (Aveyard H 2010; Mays et al. 2005), thus codes will be assigned whenever a reviewed article indicates some aspects of document reviews as a methodology in conducting HPAs. This will carry on until all relevant information from reviewed articles is obtained (Aveyard H 2010). The whole process will promote analytic consistency given that the coding exercise will only involve one researcher.

It is important to note that this study's aim is to offer relatively new findings as regards the role of document reviews and their use in informing HPAs as well as provide a framework

for the proper use of documents in HPSR. As such, the data analysis will not merely identify themes, but also attempt to generate new knowledge based on this synthesis of available evidence. Since this will solely depend on the researcher's skill of judgement and insight, authors (Aveyard H 2010; Thomas & Harden 2008) recommend that themes be carefully examined by looking at how codes that inform these themes are connected. For this review, this will be achieved by triangulation of evidence on document use in research and original texts from articles under scrutiny (Aveyard H 2010).

## **Rigour**

According to Mays et al. (2005), methodological rigour is essential for the reliability of study results and hence must be observed throughout all stages of the study. To ensure this, Mays et al. (2005) emphasizes the need to maintain clarity in the description of a study's aims and explicit as well as a comprehensive in the description of methods for repeatability of the review.

In this regard, the researcher will ensure rigour throughout all stages from literature search to the analysis phase, by observing the following at every step: firstly, the use of knowledgeable colleagues comprising of the supervisor, librarians and other students on postgraduate studies to guide the review and ensure that rigour in all essential stages is achieved. Secondly, the use of various databases will also help to reduce the risk of selection and publication bias (Hammerstrøm K. 2010). Thirdly, in the data analysis phase, sufficient detail on the stages involved in synthesising and analysing the information will promote validity, generalizability and repeatability of the study. Additionally, as article selection for inclusion will involve more than the researcher, it will enhance accuracy and trustworthiness of the codes and themes formulated, as well as the conclusions drawn.

## **Ethical considerations**

Ethical approval of the study protocol will be obtained from the institutional review board at University of Cape Town. It is important to note that this study will not directly deal with human participants, therefore it will neither use consent forms or any data collection tools

that need to be reviewed and approved by the institutional human research ethics committee.

### **Study limitations**

The judgement and selection of appropriate articles for the review have the potential to lead to selection bias as the reviewers have their own perceptions and understanding of the study topic. The exclusion of other articles and sources of data based on language or year of the publication is another limitation since these sources may contain relevant data on document reviews and how they aid in informing HPAs.

### **Timeline**

The review for this study is expected to begin in September 2017 followed by data extraction and analysis in October to November and a final write up in December. The researcher anticipates a narrow scope of available literature from the LMICs deeming a rapid process thus facilitating the intention to submit the final report of this write up by the month of February 2018. The table below summarises the anticipated activities and period to complete this study.

**Table 2: Study Timeline**

Component	Activity	Date
Part A: Protocol	Topic formulation	June, 2017
	Draft	June, 2017
	Edits	July, 2017
	Submission to research committee.	August, 2017
Part B: Literature Review	Literature review	August, 2017
	Systematic review	September, 2017
	Data extraction and analysis	October,2017-January,2018
Part C: Journal manuscript	Drafts	February, 2018
	Edits	March-May,2018
	Submission/Intention to Submit	June, 2018
	Submission	August, 2018

**Source: Author**

## Budget

The study will be self-funded and therefore all incidental costs listed in the table below comprise all resources that will be required for this study.

**Table 3: Budget**

Category	Item	Cost
Stationary	Pens	R100.00
	Notebooks	R100.00
Printing	Dissertation	R500.00
Contingency 10%		R70.00
<b>Total</b>		<b>R770.00</b>

**Source: Author**



## **Dissemination**

Results of this study will be disseminated in a thesis format and as a manuscript made available to the UCT library. It will also be made available as a published article in a suitable journal, readable by other students, academics at UCT, as well as policy makers and analysts. Where possible, findings will be shared at annual conferences with other researchers in the health policy and systems sector. The aim of this dissemination will be to cement and guide other researchers and policy analysts on the approaches advocated to best inform health policy analyses through the use of document reviews, whether as a sole method or as a supplementary method.

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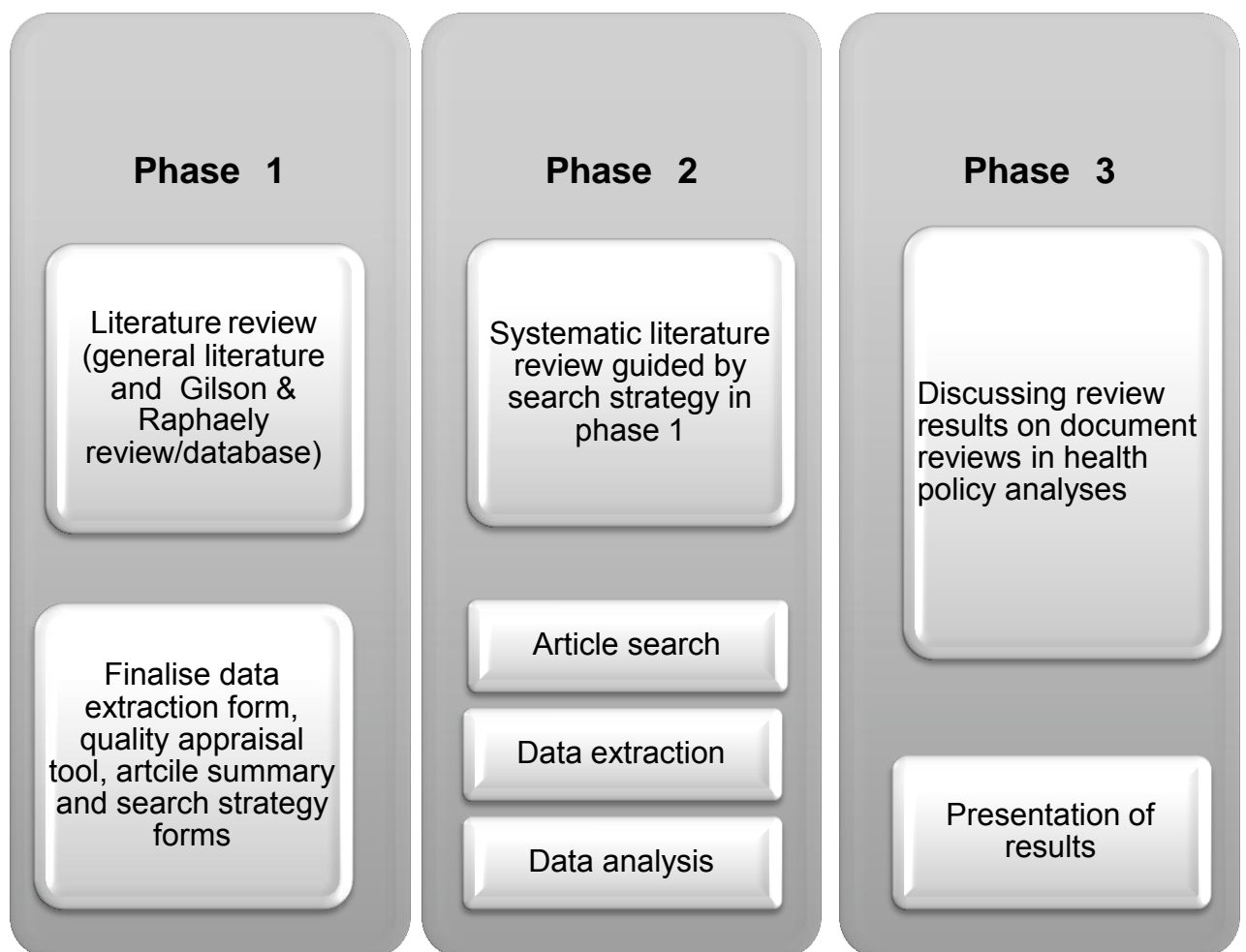
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## Appendices

### Appendix 1 – Diagrammatic presentation of study phases



## Appendix 2 – Search Strategy

Database	Date of final Search	Results						
		Total search	Relevant articles Retrieved	Combined Databases	After Removal of Duplicates	After Title and Abstract Screening	After full text reading	Eligible Articles for Review
PubMed	4/10/17	241	111	1,059	991	182	40	28
Africa Wide Information, Academic Search Premier, EconLit, SocINDEX and CINAHL via	4/10/17	1,491	763					
Web of Science	4/10/17	8853	87					
Scopus	4/10/17	667	93					
International Bibliography of social sciences	16/10/17	69,305	99					
<b>Total</b>		80,559	1,059	1,059	991	182	40	28

## PubMed (241)

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### **International Bibliography of Social Sciences (69,305)**

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 income population" OR "middle income populations" OR "poor countries" OR "poor  
 country" OR "Poor Economies" OR "Poor Economy" OR "poor nation" OR "poor nations" OR

"poor population" OR "poor populations" OR "poor world" OR "poorer countries" OR "poorer country" OR "Poorer Economies" OR "Poorer Economy" OR "poorer nation" OR "poorer nations" OR "poorer population" OR "poorer populations" OR "poorer world" OR "third world" OR "transitional countries" OR "transitional country" OR "Transitional Economies" OR "Transitional Economy" OR "under developed countries" OR "under developed country" OR "under developed economies" OR "under developed economy" OR "under developed nation" OR "under developed nations" OR "under developed population" OR "under developed populations" OR "under developed world" OR "under served countries" OR "under served country" OR "under served nation" OR "under served nations" OR "under served population" OR "under served populations" OR "under served world" OR "underdeveloped countries" OR "underdeveloped country" OR "underdeveloped economies" OR "underdeveloped economy" OR "underdeveloped nation" OR "underdeveloped nations" OR "underdeveloped population" OR "underdeveloped populations" OR "underdeveloped world" OR "underserved countries" OR "underserved country" OR "underserved nation" OR "underserved nations" OR "underserved population" OR "underserved populations" OR "underserved world"))

AND

(Health polic\*)

AND

((documentary review) OR (document review) OR (documentary research) OR (document analysis) OR (policy analysis))

AND

(pub.exact ("Health Policy and Planning") AND la.exact ("ENG"))

AND subt.exact ("health policy") AND pd (20080101-20161231) AND PEER (yes))

## Appendix 3: Quality appraisal tool

### Critical Appraisal Skills Programme (CASP)

making sense of evidence

## 10 questions to help you make sense of qualitative research

This assessment tool has been developed for those unfamiliar with qualitative research and its theoretical perspectives. This tool presents a number of questions that deal very broadly with some of the principles or assumptions that characterise qualitative research. It is *not a definitive guide* and extensive further reading is recommended.

### How to use this appraisal tool

Three broad issues need to be considered when appraising the report of qualitative research:

- **Rigour:** has a thorough and appropriate approach been applied to key research methods in the study?
- **Credibility:** are the findings well presented and meaningful?
- **Relevance:** how useful are the findings to you and your organisation?

The 10 questions on the following pages are designed to help you think about these issues systematically.

The first two questions are screening questions and can be answered quickly. If the answer to both is “yes”, it is worth proceeding with the remaining questions.

A number of italicised prompts are given after each question. These are designed to remind you why the question is important. Record your reasons for your answers in the spaces provided.

---

The 10 questions have been developed by the national CASP collaboration for qualitative methodologies.

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## Screening Questions

1. Was there a clear statement of the aims of the research?

☐ Yes

☐ No

Consider:

- what the goal of the research was
- why it is important
- its relevance

2. Is a qualitative methodology appropriate?

☐ Yes

☐ No

Consider:

- if the research seeks to interpret or illuminate the actions and/or subjective experiences of research participants

Is it worth continuing?

### Detailed questions

#### ..... *Appropriate research design*

3. Was the research design appropriate to address the aims of the research?

Write comments here

Consider:

- if the researcher has justified the research design (e.g. have they discussed how they decided which methods to use?)

#### ..... *Sampling*

4. Was the recruitment strategy appropriate to the aims of the research?

Write comments here

Consider:

- if the researcher has explained how the participants were selected
- if they explained why the participants they selected were the most appropriate to provide access to the type of knowledge sought by the study
- if there are any discussions around recruitment (e.g. why some people chose not to take part)

.....  
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.....

*Data collection*

**5. Were the data collected in a way that addressed the research issue?**

Write comments here

*Consider:*

- if the setting for data collection was justified
  - if it is clear how data were collected (e.g. focus group, semi-structured interview etc)
  - if the researcher has justified the methods chosen
  - if the researcher has made the methods explicit (e.g. for interview method, is there an indication of how interviews were conducted, did they use a topic guide?)
  - if methods were modified during the study. If so, has the researcher explained how and why?
  - if the form of data is clear (e.g. tape recordings, video material, notes etc)
  - if the researcher has discussed saturation of data
- .....

*Reflexivity (research partnership relations/recognition of researcher bias)*

**6. Has the relationship between researcher and participants been adequately considered?**

Write comments here

*Consider whether it is clear:*

- if the researcher critically examined their own role, potential bias and influence during:
    - formulation of research questions
    - data collection, including sample recruitment and choice of location
  - how the researcher responded to events during the study and whether they considered the implications of any changes in the research design
- .....

*Ethical Issues*

**7. Have ethical issues been taken into consideration?**

Write comments here

*Consider:*

- if there are sufficient details of how the research was explained to participants for the reader to assess whether ethical standards were maintained
  - if the researcher has discussed issues raised by the study (e.g. issues around informed consent or confidentiality or how they have handled the effects of the study on the participants during and after the study)
  - if approval has been sought from the ethics committee
- .....

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**8. Was the data analysis sufficiently rigorous?**

Write comments here

Consider:

- if there is an in-depth description of the analysis process
- if thematic analysis is used. If so, is it clear how the categories/themes were derived from the data?
- whether the researcher explains how the data presented were selected from the original sample to demonstrate the analysis process
- if sufficient data are presented to support the findings
- to what extent contradictory data are taken into account
- whether the researcher critically examined their own role, potential bias and influence during analysis and selection of data for presentation

.....  
*Findings*

**9. Is there a clear statement of findings?**

Write comments here

Consider:

- if the findings are explicit
- if there is adequate discussion of the evidence both for and against the researcher's arguments
- if the researcher has discussed the credibility of their findings (e.g. triangulation, respondent validation, more than one analyst.)
- if the findings are discussed in relation to the original research questions

.....  
*Value of the research*

**10. How valuable is the research?**

Write comments here

Consider:

- if the researcher discusses the contribution the study makes to existing knowledge or understanding (e.g. do they consider the findings in relation to current practice or policy, or relevant research-based literature?)
- if they identify new areas where research is necessary
- if the researchers have discussed whether or how the findings can be transferred to other populations or considered other ways the research may be used

Quality assessment form

	Author(s) and Year of Publication	
	Title of article	
	Clear study objectives (Y/N)	
	Appropriateness of design to objectives (Y/N)	
	Clear Methodology (Y/N)	
	Clear description of documents used. (Y/N)	
	Detailed information of data obtained from documents used (Y/N)	
	Rigorous selection of documents used? (Y/N)	
	Total score out of 6	
	Included (Y/N)	
	Excluded (Y/N) Reason for exclusion.	



Appendix 4 - Article Summary Template

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings

## Appendix 5 - Data Extraction form

Author(s) and year of publication	Country of study	Aim of study	Data collection methods	Types and number of documents used					Focus of study	Level of health system	Identified challenges with use of document	Authors comment on the use of documents
				Policy documents	Media outputs	Letters and diaries	Research outputs	Total number of documents				

## **PART B: Literature Review**

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## Introduction and background

Health policy is described as a component of public policy. Public policy has been referred to as *“a set of political decisions for implementing programs to achieve societal goals”* Cochran and Malone (1995). Health policy falls under one of the divisions of public policy and is described as decisions, plans and actions that are undertaken to achieve specific health care goals within a society (World Health Organisation). The systematic study of factors related to the way these policies are developed, formulated and implemented is defined as policy analysis (Lehmann 2016). *Health policy analysis therefore involves the study of policies set by both public (government) and private sectors as well as actions and inactions of organisations outside the health system, as these also affect health* (Buse K. 2005).

There are several reasons underpinning health policy analyses (HPAs) and why they are conducted in both the developing and developed world. To begin with, health policy analysis is recognised as a core component in health system reforms, as it creates grounds for learning from past mistakes and making improvements for existing and future policies (Walt & Gilson 1994a). Secondly, health policy analysis is used to substantiate policy development and implementation as a means to greater efficiency in public resources allocation (Jenkins-Smith 1990). Lastly, through health policy analysis, policy analysts are able to explain the political dimensions of health policies, analyse stakeholders' behaviours in different policies and explore the theoretical frameworks involved in policy processes (Walt et al. 2008c).

Since health policies are multidisciplinary in nature, analysts have also taken different angles in trying to analyse them. This has been achieved through the use of theories, models and frameworks, derived from different disciplines, which guide the focus of the analysis. Several theoretical and analytical frameworks have been developed over time, to try and understand the messy world of policy making. In 1994, in an attempt to develop a framework that takes into account the key dimensions in policy development of context, actors, process and content, Walt and Gilson proposed the use of the policy triangle for the analysis of policy, in low and middle income countries (LMIC) in particular (Walt & Gilson

1994a). Subsequently, a systematic review which looked at whether and how the policy triangle had been used in HPAs conducted in LMICs was conducted by Gilson and Raphaely (2008). This covered the period from when the policy analysis triangle was first introduced in 1994 to 2007. In this review, they identified the policy analysis triangle as the most commonly used framework in LMIC health policy analyses.

Depending on the objectives of the policy analysis, other models and theories that best inform a particular analysis are employed. For instance, studies focusing on agenda setting, which is part of the policy process, usually use the Kingdon's agenda setting model to address the three parallel streams of interventions that lead to policy change (Lehmann 2016) or Shiffman and Smiths' framework, to understand why certain initiatives are prioritised in a policy process (Shiffman & Smith 2007). In a similar vein, analysts focusing on implementation of policies might employ Lipsky's bottom up; street bureaucracy model (Walt et al. 2008c) and so forth.

Besides the focus of the policy analysis, methods also determine how a policy analysis is conducted, whether prospectively or retrospectively. A retrospective policy analysis usually is done on an existing policy to identify why and how policy issues come into existence, whether their objectives are met or not, how they are met and if not, why (Buse et al. 2012). It is more descriptive in the manner that it attempts to explain policies and their developmental processes. Conversely, a prospective analysis is employed in the development or modification of new policies and hence they are prescriptive in nature, as the analyst is sometimes involved in the formulation of the policy and proposals (Hambrick Jr 1998).

It has been noted from literature that policy analyses conducted in the LMICs are often informed by primary data collection approaches, whereby interviews with key stakeholders (whether insiders or outsiders), FGDs, observations and other interactive methods are the major source of information in guiding these analyses (Gilson & Raphaely 2008). Owing to this choice of methodology are resource constraints which make the preservation of secondary data difficult and not always readily available (Gilson & Raphaely 2008). Due to the 'fluidity' of the policy environment, these primary data collection methodologies may not always be feasible. All these reasons, when brought together, may eventually require

policy analysts to use other less interactive, but robust methods such as document reviews. Besides efforts to fully understand all methodologies that inform policy analyses in the LMICs (Gilson & Raphaely 2008; Walt & Gilson 1994a), there's a relatively small amount of literature around other methodologies, such as document reviews and how they feature in health policy analysis. Recent methodological work done in LMIC include the examination of how global policies are adopted; the processes therein, the challenges and alternatives available (Berlan et al. 2014). Another review by Erasmus et al. (2014) established the aspects and HPA literature to identify the gaps and generate thoughts for future HPA studies in LMICs. Further studies have looked into the aspects of discretionary power as it relates to policy implementation in LMICs (Gilson et al. 2014), the use of street level bureaucracy theory in policy implantation among LMICs (Erasmus 2014), and the assessment of HPA studies against a priority-setting framework in order to strengthen agenda setting phases during policy formulation among LMICs (Walt & Gilson 2014). No systematic review focusing on the adoption of document reviews to inform HPA in LMICs has been done yet.

For general knowledge about documents and their utility in health systems research (HSR), health policy and systems research (HPSR) and HPA studies in particular, the author used the following databases to search for relevant information: African Wide Information, EconLit, SocINDEX, CINAHL, Academic Search Premier via EBSCOhost, Scopus, International Bibliography of the Social Sciences, PubMed, Google Scholar and Web of Science were searched for English published articles from as far as the early 1990's to present. To have an understanding of the methodological and conceptual lessons of how documents have initially been used in conducting HPA in LMICs, the author used the database provided by Gilson and Raphaely (2008) and looked at their literature review developed for the period 1994-2007 as it is the first methodological review of LMIC HPA studies conducted in the given period. Subsequent sections below will therefore provide information on documents and document reviews; what they are, why they are employed in HSR and the types of documents commonly used in HSR and HPA studies. To demonstrate how document reviews have so far contributed to HPA in the past HPA methodological studies among LMICs, a summary of the Gilson and Raphaely (2008) literature review is provided.

## **The definition of a document**

According to the Merriam Webster dictionary (Merriam Webster 2015) a document is defined as “*an original (official) paper relied on a basis, proof or support of something*” or “*a writing conveying information*”. Similarly, other authors (Green J. & Thorogood N. 2014; Walsh 2014) have described documents as a whole range of written and material sources available in relation to a particular topic though not created by the researcher. Additionally, Bowen (2009) indicates that documents usually contain words and images that are recorded without the intervention of the researcher. Although these definitions portray documents as a basis for policy analyst’s confidence in conducting studies based on document reviews, these sentiments are also subjected to potential shortcomings. One such potential challenge is the quality of these documents, which needs to be considered before one can conclusively make judgements and generalisations about a phenomenon.

Documents are either produced by an individual for private purposes or an organisation or team for public use (Walsh 2014). Private documents range from personal letters to diaries, while public documents are usually for public use such as policy documents, electronic databases, newspapers and other government sources. Private documents in particular may not be easily accessible, and researchers need to take note of this.

Scott (1990) defines a document as “*an artefact which has text as its central feature*”. The Oxford dictionary describes an artefact as a noun used to define a man-made object and one of historical and cultural interest, observed in a scientific investigation. Since documents are person-made and help policy analysts understand events that took place in their absence (thus historical), to generate an evaluation of a health policy, these definitions can be used by policy analysts to justify or critique a documents’ influence in HSR research.

## **Types of documents used in health policy analysis studies**

### **Public documents**

Over the years, data obtained from public sources such as official statistics from international organisations, governments, national agencies and local health authorities have been used to carry out research (Green J. & Thorogood N. 2014; Hakim 1982). This is



still the case as many current-day researchers, including policy analysts, use artefacts and written documents to carry out research (Law & Mol 2008). Law and Mol (2008) argue that through document reviews and the use of other artefacts, certain political effects as well as work practices, such as skills and moral elements of an organisation, which are not usually derived from other data collection methods, is obtained. In agreement, Bowker and Susan (1999) ascertain that apart from providing essential information on a phenomenon under study, public medical documents also provide rich data in health and medicine. They continue to give examples of how documents in the health field are politically constructed and how these elements are inevitable in the research world. This is because social and political factors largely influence organisations and nations in the way they meet populations' health needs (Bowker & Susan). For this reason, medical documents that are available for public use can be a basis for evaluating a government's commitment to its citizen's wellbeing and are hence crucial. Keeping this in mind, researchers should be aware of these aspects of public documents, to direct the way data is collected and reported (Bowker & Susan). Some of the commonly used public documents with similar characteristics include media reports, research reports, personal letters, emails, diaries and policy documents (Policy reports, national guidelines and strategies, meeting proceedings and training manuals) among others. Judging from the overview of 1994-2007 studies, the most commonly used documents in HPAs studies include the ones briefly discussed below.

### ***Mass media reports***

The media is broadly defined as *the public channels of communication that provide public accounts and reports on events* (Briggs & Burke 2002). Mass media reports are important for both past and present events and hence crucial in health policy analysis. Newspapers, an example of mass media reports, are one important type of public source of information that provide researchers with data on the political and social views of crucial issues affecting the public at specific times and places (Tosh & Phillips 2009). Media reports usually include contemporary sources such as newspaper reports, television programs, as well as films, all of which are considered accessible data for many health researchers, including health policy analysts (Seale 2005). A historical example of how the media can help bring about reforms in a system is given by Peter Cunningham who followed how the British society portrayed the image of teachers over 40years. Through the use of newspapers as a documentary

source between 1950 and 1990, he managed to trace how teachers' professionalism and status was presented in the media. Through the same means he managed to pick up the political aspects of the changes in this profession. While this is seen in education circles, the same strategies can be applied in the health field to answer social research questions as the construction and representation of ill-health (Oinas 1998). In the African setting, Schneider (2002) also uses a series of media reports to analyse and comment on the politics of the AIDS policy in South Africa in the post-apartheid era. A detailed account of the kind of documents used in her paper is not given. Still, it is apparent that she used a significant amount of media reports to come up with the chronological contestation that took place around the AIDS policy in South Africa. This is observed in her constant reference to films and comments from newspapers in response to the government's failure to meet the public's health needs. All these instances emphasise the importance of mass media reports as documentary sources that enhance strategic pressure put on governments to facilitate policy change as evidenced by several other authors (Asbridge 2004; Holder & Treno 1997; Wallack & Dorfman 1996).

### ***Policy documents and research reports***

Policy reports are usually used as a source of official documents entailing what international bodies, Non-Governmental Organisations (NGOs), governments and statutory agencies do (Green & Thorogood 2013). The data herein may be accessible to researchers through websites, but not usually published and made available in libraries, hence referred to as grey literature (Green & Thorogood 2013).

Just like research reports, these documents help researchers grasp what certain organisations do. Policy documents help with the framing of identified problems into policy agendas, the facts within the problems and solutions to the stated problems (Prior et al. 2012). Prior et al. (2012) emphasise that it is through the study of policy documents that cultural and political aspects that contribute to successful policy reforms may be uncovered. This is made possible through the use of language and other sign systems that are used to convey not merely the superficial meaning of an organisational culture, but also the hidden social meanings attached to them such as staff uniforms or a hospital's structural design (Green & Thorogood 2013).

Similarly, research reports have good utility as sources of evidence when conducting document-based research. This is partly as a result of the demand for evidence-based medicine that has not only put pressure on health practitioners, but also policy makers to use research outputs in formulating and implementing health reforms (Innvær et al. 2002). While most research reports have been used to develop new research questions or review findings of other studies, policy analysts are encouraged to use them to probe and cross-examine assumptions and conclusions made in various outputs (Bell 2012). Additionally, policy analysts could also use research reports to examine the questions relating to the social construction of ill-health, disease trends and well-being through the use of document reviews (Potter & Wetherell 1987).

## **Personal documents**

Diaries and letters have often been used by historians to demonstrate lived experiences of individuals (Green & Thorogood 2013). Although they are understood to contain distinctive experiences, Denzin (1989) cautions document analysts to acknowledge and handle personal documents as constructions, with potential for bias, as they give partial sentiments and not the whole truth about a particular subject.

### ***Diaries***

Alaszewski (2006) defines diaries as regular records of life that are personal and contemporaneous. While 'solicited' diaries are created on a specific topic, by individuals who have undergone a particular experience, and are rewarded for, 'unsolicited' diaries are written for purposes of research as they provide people's perceptions on social happenings and are not written for financial gain, hence readily available (Green & Thorogood 2013). Both can be used by researchers to understand health related topics in real people's lives. More recently, these personal documents have been made available to the public through blogs enabling researchers to carry out comparative studies over time and space as they are archived on an everyday basis (Hookway 2008). Although these are made publicly available, they bring about ethical debates, as they are essentially regarded as personal information. Analysing personal information without permission is considered unethical even when it is posted in the public arena. Their limited use is also seen in the methodological review by Gilson and Raphaely (2008) where only 2 (Gladwin et al. 2003; Mutemwa 2006) out of 43

health policy analysis studies used private sources (diaries and personal letters). With so much ethical considerations that are required when dealing with private documents, little has been written on how these are navigated during the HPA studies.

### ***Electronic communication***

In a similar vein, electronic communications that raise the same arguments include emails, electronic records found on social media such as Facebook and personal blogs. These containers of researchable data are now gaining traction and come with possibilities and challenges, in particular, issues of privacy. For this reason, Sixsmith and Murray (2001) caution researchers interested in using email lists and similar sources as documentary sources, to check if lists or discussion boards are permitted for research purposes. This has proved to pose hurdles in obtaining permission to conduct studies based on email exchanges, as it is almost impossible to get informed consent from all users on the mailing list. So far, the author did not come across a health policy analysis that was based on a mailing list, which could suggest the inaccessibility of such documents to researchers in the studies from the 1994-2007 Gilson and Raphaely literature review.

## **The definition of document review**

Document reviews have been described as a way of collecting data by reviewing existing documents (Center for Disease Control & Prevention 2009). Payne and Payne (2004) further describe this technique as a research methodology that is used to categorise, investigate and identify the limitations of other data sources. As this technique is done in a systematic manner to review and evaluate printed or electronic documents (Bowen 2009), the terms ‘document analysis’ and ‘documentary research’ are sometimes used interchangeably with document review. Indeed, this technique is likely to be confused with other techniques of collecting data from existing bodies of literature such as systematic reviews and literature reviews. It is important to distinguish these concepts as document reviews feature in these techniques. A systematic review is *“a retrospective approach to research, which summarises individual studies done on particular areas of interest, with the use of specific search strategies to synthesise and critically appraise literature in a scientific and systematic manner”* (Cook et al. 1997; Higgins & Green 2011; Straus & McAlister 2000). In contrast, a

literature review is simply a process that accounts for what has been published by accredited authors or researchers on a specific topic, without specifically focusing on the methods used (Centre for Reviews and Dissemination 2008).

Document reviews have also been identified as one of the essential methods of data collection, whether in qualitative or quantitative research designs (Robson 2002). There are several factors that determine whether a researcher adopts document reviews as an independent data collection method or as a supplementary method.

Practically, policy analysts have found it challenging to access the many different stakeholders and networks that are sometimes geographically widespread to reach, while trying to obtain '*policy process data*' essential for informing a health policy analysis study. So, while document reviews are perceived as merely a supplementary method of informing research in the social sciences domain (Mogalakwe 2009), other authors (El-Jardali et al. 2014; Hanney et al. 2003) in the HPSR have proven otherwise. This is evident in the large number of articles that adopted document reviews in the Gilson and Raphaely's data base. Although only a few of the articles in this database used document reviews as an independent data collection method, (Au 1999; Herdman 2002; José Luiz A. C. Araäjo 1997; Malik et al. 2006; Schneider 2002), the use of document reviews in the remainder of the 43 top policy analysis studies suggests that it is a significant method in HPA studies. Whilst reasons as to why the method is adopted as an independent data collection method or supplementary method for these HPA studies have not been fully explained in the articles, the author believes they fall within the reasons given above and hopes to investigate this question further in the proposed systematic review of studies done after the Gilson and Raphaely review period.

## **Why document reviews?**

Firstly, documents or documentary sources are usually available in their abundance (Green J. & Thorogood N. 2014). Green J. & Thorogood N. (2014) ascertains that most developed societies have produced significant amounts of data that have been made available to the public thereby supporting research and benefiting researchers globally. These include private records such as emails, photographs and diaries, which are all categorised as

personal records. The other, public category, is comprised of official statistical data obtained from surveys, censuses and other sources (Green J. & Thorogood N. 2014). While this might benefit most researchers and policy analysts in terms of access, Walt et al. (2008c), argue that sometimes availability of large volumes of documents supporting policy analysis studies is challenging. Documents, such as large volumes of exchanged emails among stakeholders involved in policy processes, can become too difficult to extract and analyse. Other authors have, however, concluded that adequate information found in documents may not be accessible all the time (Chan et al. 2005; Love 2013; Yin 1994a). In other instances, access to some pertinent emails that provide crucial information around the policy procedures may not be accessible because they are private and highly guarded, since policy processes are usually intertwined with power and political aspects (Walt & Gilson 1994a).

Secondly, documentary reviews are best known for their non-intrusiveness and hence belong to non-reactive methods (Tolley et al. 2016; Ulin et al. 2005). Researchers are able to understand human culture and behaviour without interfering with the processes taking place Bryman and Bell (2007) further argue that the use of documents in research saves time and protects researchers from breaching ethical regulations especially where issues under study are sensitive. This is critical in a policy analysis study as it speaks to how analysts interact with their research environment and policy contexts without any interference. During research, it is usually almost impossible not to react or intervene especially when studying human beings (Ulin et al. 2005). For policy analysts, this means being able to engage with the policy environment and stakeholders – sometimes with sensitive political issues that call for action without interfering (Shiffman 2007). So, while researchers might not experience first-hand interaction with the policy environment and policy elites to bring about a more meaningful research experience, document reviews provide a means of studying policy processes without the risk of unintentional interruptions that may affect the validity and credibility of study results. However, documents are not quite able to capture the context in which data was collected and thus the validity of archived evidence falls short of the validity found in primary data (Mauthner et al. 1998). While this is the case, primary data collection also has limitations, such as missing data for example. Indeed, Prior (2003) compares document text to speech and asserts that, just like

speech makes a difference, so can text (Prior 2016). She quotes Green M (2014) who advocates that “text can inform, indicate, certify, proclaim, and announce. At the same time text can ban, authorize, notify, summon, declare, pardon, bequeath and endorse”. All these concepts are closely linked to how document text works in policy processes and how document reviews therefore are a dependable source for HPA data. From a different perspective, one can then appreciate how documents, created by policy makers, have the potential to act against them where documents point to evidence of complications in a policy process (Prior 2016).

Thirdly, document reviews offer diversity in the way that a phenomenon under study is interpreted, an understanding of historical perspectives and a discovery of meanings and insights related to the research topic, that can only be found in writings from the past (Angers & Machtmes 2005; Merriam 1988; Ulin et al. 2005; Yin 1994b). This is because document text have the ability to explicitly reveal cultural norms and values, beliefs, people’s hopes as well as fears, failures and triumphs, all which is found in the way they express themselves in written texts (Ulin et al. 2005). Given the nature of retrospective health policy analysis whereby a researcher relies on existing data to capture all of these aspects, Merriam (1988) asserts that document reviews might be the only practical approach to conducting one’s study, especially in resource constrained research environments . Bowen (2009) also highlights how the use of document reviews can help a researcher identify the grassroots of certain existing problems currently impinging the societies. It can be said then, that document reviews are best suited for some of the aims of conducting policy analysis studies, as they help us learn from the past and help to illuminate mistakes and failures that can guide improvements for the future (Gilson & Mills 1995).

Fourthly, information from documents are also known to help researchers supplement data gathered from other sources, as well as allowing for triangulation of information with other data sources (Connell et al. 2001; Grix 2001; Hansen 1995; Hoepfl 1997). Whilst adding onto data gathered from other sources, document reviews also help researchers verify findings to make sure that it corroborates with the evidence obtained elsewhere (Angrosino & Mays de Pérez 2000). For this, document reviews add valuable richness to knowledge bases. Apart from adding on to an already existing knowledge base, they suggest new research questions

that could be dwelt on by other researchers. The use of document reviews as a supplementary data collection method has been mostly observed in retrospective health policy studies, where documents containing information on policy processes, government and stakeholder communications have been used to evaluate existing policies (El-Jardali et al. 2014; Hanney et al. 2003). This is besides other data sources such as stakeholder interviews, observations and focus group discussions, repeating Mogalakwe's (2009) sentiments, of how document reviews are mostly regarded as supplementary means of data collection rather than methods credible enough to be solely depended upon.

In addition to the points above, to emphasise its ability to help researchers identify gaps and prevent repetition of past mistakes, document reviews are again a way of tracing change and development in any process, including policies (Bowen 2009). This, however, is highly dependent on whether the researcher has access to all the documents relating to the phenomenon under study, to be able to make comparisons. Where this is possible, Yin (2008) argues that any minute discrepancies among the different documents usually reflects substantive changes and developments in any setting within a given period. Documents can portray a vivid picture of how an organisation or project fared over time and can be applied in analysing health policies in the LMICs.

So, while well-constructed documents can provide researchers with sufficient information to the extent that a study can sometimes be done solely based on written text, Atkinson and Coffey (2004) cautions researchers to be diligent in the way they use documents. This is because, despite all their strengths, it is sometimes hard to conclude about an organisation's day to day operations solely based on documents. As applied to HPAs, this could also be a draw-back, as policies and people evolve and documents mainly capture snapshots of moments or periods in time. With constant changes and the temporality of other events in short term policies, documents may not capture all essential details within policy process stages and hence the term 'curse of the temporal' by Hunter (2003). Despite this strong reservation though, Atkinson and Coffey (2004) advises researchers to acknowledge documents' existence and embrace them for what they are and what they can help researchers accomplish, for they are indeed vital. It is in the interest of this review to also identify how all these notions were put to consideration in the policy studies under review.



## **Reliability and validity of documentary sources**

Despite the many merits of using documents in HPA, there are some significant potential drawbacks. Reliability and validity are two of the major concerns when it comes to the use of document-based data to inform research (Green & Thorogood 2013). This is because of the questionable representativeness of the few selected documents and records used in conducting studies and the authenticity of these documents. These doubts are rooted in the potential for selectiveness of information retrieved from these documents. It is usually hard to ascertain if views or experiences captured in the texts or photographs are fully representative of the views and experiences of the whole population or a mixture of author's perceptions as well (Weber 1990a). This is due to the fact that documentary sources are vulnerable to authors' misinterpretations driven by their perceptions towards the phenomenon under study (Judd et al. 1991).

Documents conveying historical events raise additional concerns, in that the authenticity of the records has to be assessed (Denzin 1989). This is commonly seen in personal records, which are sometimes suspected to be fake (Denzin 1989). For this reason Hookway (2008) encourages researchers to account for the context in which the document was produced. This may sometimes be difficult for policy analysts carrying out retrospective studies that are document based as they have no first-hand engagement with the policy environment, but depend on secondary data. An example of such is cited by Green and Thorogood (2013), who comments on how policy documents may not relay adequate information about the policy process and the role and contributions of all decision-makers that led to policy change. In these instances, the author recommends that other research strategies be considered.

## **Overview of documents use in health policy analysis studies (1994-2007)**

Secondary data in form of documents has been commonly used in policy data analysis (Fielding 2004). Although this is the case, no thorough studies have been conducted to look at how this methodology is applied in health policy analysis, its impact and contribution to HPA studies. However, this review by Gilson and Raphaely (2008) helps us appreciate how

document reviews have contributed to explaining health policy processes through HPA studies that have adopted this methodology. Despite having different objectives from this particular study, the review provides an extensive data base of all HPA studies done in the LMICs for the years 1994-2007, which includes HPA studies that employ document reviews for their methodology. To create a foundation for this study, an overview of how document reviews have been employed in the Gilson and Raphaely database is provided. This overview demonstrates how document reviews have been applied, the health system levels on which they have been applied to and the insights they have helped researchers realise. This body of studies provided the researcher with a better understanding of how documents have been applied in the earlier years of HPAs in LMICs and gave some direction on what to look for in the policy analysis studies for the period 2008–2016. Further to this, the database is drawn on to shape the research questions and deductive themes employed in this review. All results presented in this section are based on the brief analysis of the Gilson and Raphaely literature review (1994-2007) and results extracted from their database.

A search for HPA studies that used document reviews, was conducted in the database made available by Gilson and Raphaely (2008) through website link in their article. Out of the 391 HPA articles found in this database, 43 articles coded 1 and 2 for highest quality by Gilson and Raphaely were identified to have used document reviews as a component of their data collection method. This overview, therefore, focuses on how document reviews were represented in these 43 articles, being cautious of the different objectives between Gilson and Raphaely's literature review and this current systematic review.

It is worth noting, that 169 articles from the database were categorised as 1 and 2 for highest quality. These 169 articles included a combination of HPA studies with varying objectives and encompassing various data collection methodologies. It was noted that, 43 HPA studies out of the 169 used document reviews as either an independent data collection method or as a supplementary method. This represents approximately 35% of document use in HPAs. The remaining 65% employed other data collection methods. This is an indication of how commonly document reviews are used in HPA studies and explains why this method's application deserves to be examined.

Out of the 43 articles reviewed, only two articles used private sources such as diaries and letters (Gladwin et al. 2003; Mutemwa 2006). Another two articles (Blas & Limbambala 2001; Gilson et al. 2003) used media reports alone. The rest used other forms of public documents such as policy documents and research reports that were accessible to researchers. Although the reason for the choice of documents in these HPA studies are not provided, having looked at the types of documents and their characteristics in the previous sections of the literature review above, the results from the Gilson and Raphaely review suggests that private documents are rarely used because they are rarely accessible. Besides access, the level of document utility in policy studies is also of great importance. This could be determined by looking at how many times documents are used especially as a stand-alone source of data.

It is interesting to note that only five out of 43 articles adopted the document review method of data collection as an independent method (Araújo Jr 1997; Au 1999; Herdman 2002; Malik et al. 2006; Schneider 2002). This represents 11% of all the 43 articles that employed document reviews as a data collection method. The remaining 89% used document reviews as a supplementary method. While this might portray document reviews as a weaker method and mostly needing its application alongside other data collection methods, it is important to consider that the focus of the Gilson and Raphaely literature review was not entirely on document reviews and risks a misrepresentation of how frequently document reviews are used in HPAs. This could have happened through the exclusion of other articles based on quality and objectives of their review. While this is the case, it is worth finding out what the determinants are for use of document as an independent method versus as a supplementary method.

Another important notion from the Gilson and Raphaely review was to identify the focus of most HPA studies in LMICs. Of interest therefore, was in the kind of HPA studies in which document reviews were used, for example whether in HPA studies looking into agenda setting, policy formulation, policy implementation or a combination of these. This may aid researchers in identifying for which policy analysis foci document reviews are best suited. From the review by Gilson and Raphaely, there has not been a clear demonstration of the association between a particular policy analysis focus and the use of document reviews. However, looking at the methodological details, it is apparent that most HPA studies (17)

that focused on policy implementation used document reviews as their data collection method. An equal number of articles (13) that focused on agenda setting and a combination of agenda setting and implementation, respectively, also used document reviews. Whilst this might not mean anything on face value, it could be an indication that HPA studies focusing on practices and experiences of policy implementation are best analysed using document reviews, whether as a stand-alone method or a supplementary method. This did not appear to be influenced by the level at which HPAs were conducted, as it was equally used in studies conducted at the local level, national and international level. The level of the health system at which studies are done seem to have little bearing on the chosen methodologies. In the review, only three of the HPA studies that were done at an international level applied the document review method. This is in comparison to 28 HPA studies that were done at a national level and 12 at a local level (organisation, district and facility). It therefore appears as if national and local level studies adopt the document review method more commonly, but what this means in practice is challenging to verify from the studies themselves. A further factor appears to be the positionality of the researcher, as highlighted by Merriam et al. (2001). Access to data, which is in form of documents, is easily negotiated if the researcher is an insider. By being an insider, a researcher is well conversant with the system; well informed of where and how to find all essential documents to support studies. This may explain why HPA studies done at a local and national level draw on document reviews more commonly, as 'insider researchers' may have easier access to such documents, compared to studies done at an international level by researchers that are less conversant with the country context.

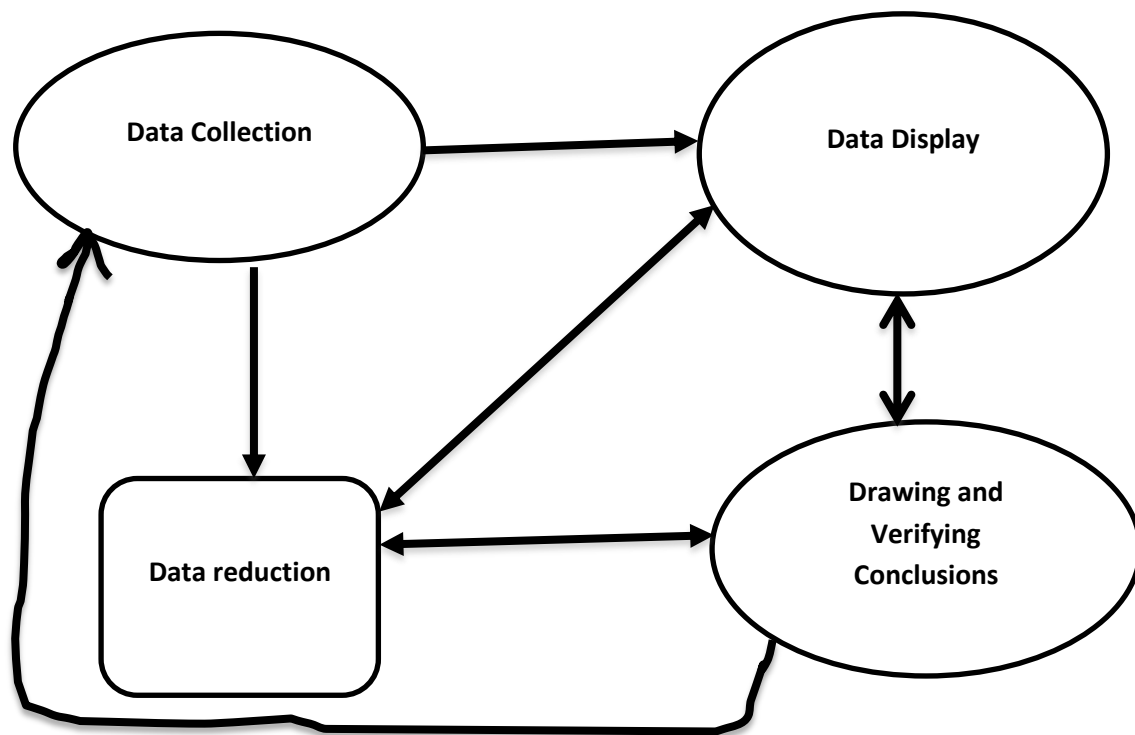
After looking at the general literature, the author identified features of documents; how to approach and apply them in HSR, and particularly in HPA, having learnt their strengths and pitfalls. The Gilson and Raphaely literature review helped identify additional issues for consideration and which will be explored in the systematic review.

## **Approach to conducting document reviews**

As discussed in the section 'why document reviews', document reviews as a method of data collection are different from other forms of data collection modes in their non-intrusiveness and the purposes they serve in qualitative research. Their similarity with primary research in

terms of rigour, lies in the requirement for resourcefulness in the way researchers select documents, translate contents and quantify concepts found in the texts (Judd et al. 1991). Worth noting is the notion that document-based studies are often susceptible to different interpretations of original events and their effects (Judd et al. 1991). For this reason, data collected from documentary sources must be handled '*scientifically*' (Ahmed 2010). This implies the application of specified processes that are systematically followed to ensure authenticity, representativeness and credibility of data drawn and ultimately the conclusions made about the topics under study (Scott 1990). "*Analysis of data derived from documentary sources is about the search for explanation and understanding in the course of which concepts and theories are likely to be advanced, considered and developed*" (Hughes et al. 1996). In view of this, it is only logical for researchers to use a specified framework that guides them whilst using document reviews as their data collection method. For it is through the use of a particular framework that researchers are able to put the collected data in shape, achieve an in-depth understanding of the content to be able to arrive at a stage where they can decide the methods of analysing the data and how to interpret it (Ahmed 2010). As put by Marshall and Rossman (1995), using a process to arrive at these phases have proven to bring order, structure and meaning to vast volumes of data collected from documentary sources. So far the author has not identified any framework that guides researchers on how to use documentary sources, especially when conducting health policy analysis studies based on document reviews. However, Miles and Huberman (1994) developed components that should be considered by researchers conducting qualitative research, which also applies to document reviews. These components include reduction of data, displaying of data, drawing and verification of conclusions. Figure 1 below illustrates and interactive model that will guide this study and the way articles included in this review are analysed.

Figure 1: An Interactive Model



**Source: Miles and Huberman (1994)**

The figure above shows how the process of data collection from various sources, including document reviews, is conducted. As document reviews are one of the methods used in qualitative research, the model is explained in relation to its use in documentary research. The arrows represent a cyclical interactive process of data collection through to drawing of conclusions that is done in an interwoven pattern. Thus before data collection, during and in the early stages of analysing the data, as well as after the data collection phase is completed (Miles & Huberman 1994), the researcher is required to move across all these components steadily while documenting all the steps to be able to identify irregularities and patterns while collecting data from documentary sources.

### ***Data reduction***

This is part of document analysis whereby a researcher decides which parts of data to include and which ones to exclude in order to effectively summarise the large volume of information, hence data condensation (Tesch 1990). The phase emanates from data collection stage whereby a researcher picks out what every piece of data means to be able to reduce it without losing its meaning as this affects how the data is later displayed. It also

involves translation of data gathered from various sources to facilitate easy analysis, storage and dissemination (Selltitz 1981). However, according to Weber (1990a) the richness and detail found in document texts sometimes brings forward too much information. It is, therefore, recommended that researchers use patterns and themes to bring this data into manageable proportions without losing any significant information thus reduction (Tesch 1990). Tesch (1990) maintains that the process should be carried throughout document review process through coding, theme formulation, segmentation and summarising information (memoing) which in the end help the researcher to conceptualise and explain data collected (Bogdan 1992; Punch 1998; Tesch 1990).

### ***Data display***

Miles and Huberman (1994) describe narrative test as the most frequently used approach of displaying qualitative data. Through proper display of data, a researcher easily identifies what is known and not known around the research area, picks out on developing relationships among concepts, propositions, explanations for further enquiry and hence a major avenue of valid and credible use of documentary sources (Ahmed 2010; Punch 1998). Just like in data collection, this is also done throughout researcher's interaction with document data (data collection to analysis).

### ***Data drawing and verifying conclusions***

The two components explained above eventually lead to this stage where conclusions are drawn from analysed data. This component is referred to as a 'fleeting second thought', which can be translated as reflections and second-thoughts that a researcher may have during writing and hence the need to go back to the data collected to verify information being included in the conclusions section. In one way or another, this stage sometimes goes concurrently with the first two stages explaining the arrows, in between the components in the diagram. In other modes of data collection such as interviews, this would involve going back to the participants to verify information gathered. In documentary research on the other hand, this would involve re-reading the documents from where data was extracted, such as going through a series of argumentations that took place in a range of emails or a series of newspapers published over a given period of time, to verify data. Although verification of data whilst in the middle of data collection they may provide answers to

queries on data collected, it is wise to draw final conclusions when all the data has been collected, to come up with more explicit conclusions (Ahmed 2010).

## **Conclusions**

In summary, the section has highlighted the most common uses of document reviews in health research and most importantly in health policy analysis studies. An overall advantage of using such sources, especially public documents, is their accessibility although this might sometimes pose as a hurdle to shaping and drawing of conclusions from all the information found in texts. Besides their practical advantages, documentary sources have the potential for analysis by several researchers that offer diversity in the way a phenomenon being studied is viewed and evaluated. This is in comparison with other data collection strategies where one person collects data or has interaction with participants and the research environment. Through the review of Gilson and Raphaely database and literature review, methodological and conceptual lessons of what to look for in this systematic review have been learnt.

To ensure that documentary resources are used effectively, an interaction model that provides a process guide for qualitative researchers, which can be used as a framework to guide researchers carrying out document-based research, has been briefly discussed. This is in consideration that a framework to specifically guide the effective use of documents in health policy analysis studies does not exist, according to the author's knowledge. The author has confidence that adoption of this model, to look at the articles in this systematic review, and how they present data will help shape and analyse data to come up with valid and reliable conclusions about the applicability of document reviews in HPA studies.



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## Part C: Journal Manuscript

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# The role of document reviews in health policy analysis among low and middle-income countries

Naomi Karen Kayesa

## Abstract

**Background:** Health policy analysis (HPA) is a central component of health systems research (HSR) and contributes significantly to the understanding of health systems reforms including their successes and failures. In most HPA studies, document reviews feature as one of the widely used data collecting methods, especially in retrospective policy analyses. Literature indicates that a substantial number of HPA studies conducted in low and middle-income countries (LMICs) are informed by interactive data collection methods such as interviews, focus group discussions (FGDs), and observations as well as non-interactive methods such as document reviews. While efforts have been made to look into the methodologies that inform health policy analyses for LMICs in the recent years, there is a dearth in knowledge specific to document reviews and how they fit into the framework for doing health policy analysis. This paper provides findings from a qualitative systematic review of peer reviewed policy analysis studies indicating the role of document reviews; why it is employed and how this methodology is positioned and motivated for in the LMICs.

**Methods:** Nine electronic databases were explored in search of articles with adequate information relating to the use of document reviews in HPA studies conducted in LMICs. All 28 articles included in this review were conducted in LMICs between the years 2008-2016. Articles were in English with free full text accessibility. Data extraction focused on the aims of the HPA, and the methodology and results sections in order to identify why and how document reviews were employed in HPA.

**Results:** Twenty-eight articles from LMICs that met the inclusion criteria and examined against a quality appraisal tool were included for thematic synthesis and analysis. Reasons as to why and how health policy analysts use document reviews was directly linked to accessibility and clarity of the document and the perceived contribution of a document to the HPA process. The more accessible the documents are, the more they are likely to be

used in a policy analysis. Inductively, the author also considered 'personal contact with policy makers' in the identification of documents as another facilitator of document use in health policy analysis studies. Besides access, it is essential that the documents are clear and do not contain conflicting information so that at all phases, intentions of the policy and outcomes are clear to the document user. Apart from validating information obtained from other data collection methods, documents have also been noted to act as advocacy instruments in the health policymaking arena. However, the results have failed to explain as to why policy analysts using document reviews fail to fully describe, quantify or properly display the data obtained from documents used.

**Conclusion:** To the best of the author's knowledge, this is the first systematic review that has looked into a specific data collection method adapted by many health policy analysts in the LMICs. HPA researchers will always draw on documents. This review has provided a structured way of thinking of documents and document reviews as a data collection method in HPA studies. It elaborates which documents are suitable, for what purposes and how to think of document quality and utility.

It is evident from this review that document reviews are a laudable, scientifically sound methodology and that it has a significant role of contributing to the conclusions made about particular policies in evaluating their processes and gauging their current state within a given timeframe. HPA researchers should not underestimate the extent of skill required to adequately analyse documents and draw conclusions from these analyses. Documents are helpful to the policy analysis process and policy analysts should equip themselves accordingly for this kind of methodology and when they do embark on documentary reviews.

**Key words:** Document review, Document analysis, Documentary research, health policy, policy analysis, LMICs.

## Introduction

Health policy analysis (HPA) is a central component of health systems research (HSR) and contributes significantly to the understanding of the successes and failures of health systems reforms (Walt & Gilson 1994a). Through HPA studies, there has been an understanding of how organisational programs and policies in the health system function and how efficient health systems are in making health services accessible to beneficiaries (Sheikh et al. 2011).

However, the methods in which to achieve valid, reliable and replicable HSR results have been limited in LMICs due to various reasons. These range from inadequate resources (both human and material) and political instability among others (Adam et al. 2011; Labonté & Gagnon 2010). Of greater importance has been the lack of diversity in the way HSR is conducted, which has contributed to the lack of growth in this domain (Gilson et al. 2008b). Indeed, reports have shown that most HSR rely largely on primary data collection methods, whereby interviews and other interactive methods are promoted more than non-interactive methods such as document reviews (Gilson & Raphaely 2008; Walt et al. 2008b). Nonetheless, a consistent use of document reviews in HPA studies has been explicitly noted in the LMICs (Fielding 2004). The use of documents in HPA studies is influenced by the fluidity of the policy environment and the lack of resources to conduct primary data collection. From the broader literature, policy documents, research reports and media reports have been identified as the commonest forms of documents that are incorporated in HPA studies (Fielding 2004; Long-Sutehall et al. 2011). Despite this widespread use of documents, there is no clear framework of how to apply document reviews in HPA studies. While documents have been identified as making significant contributions in the social science domains, very little is known on how they are used in health policy analysis. Besides being a credible source and a viable methodology for conducting retrospective HPAs, the challenges of adopting this methodology or why they are rarely employed as independent data collection methods is not fully understood. More importantly, the way in which these documents are appraised and applied to policy analysis, has not been fully investigated.

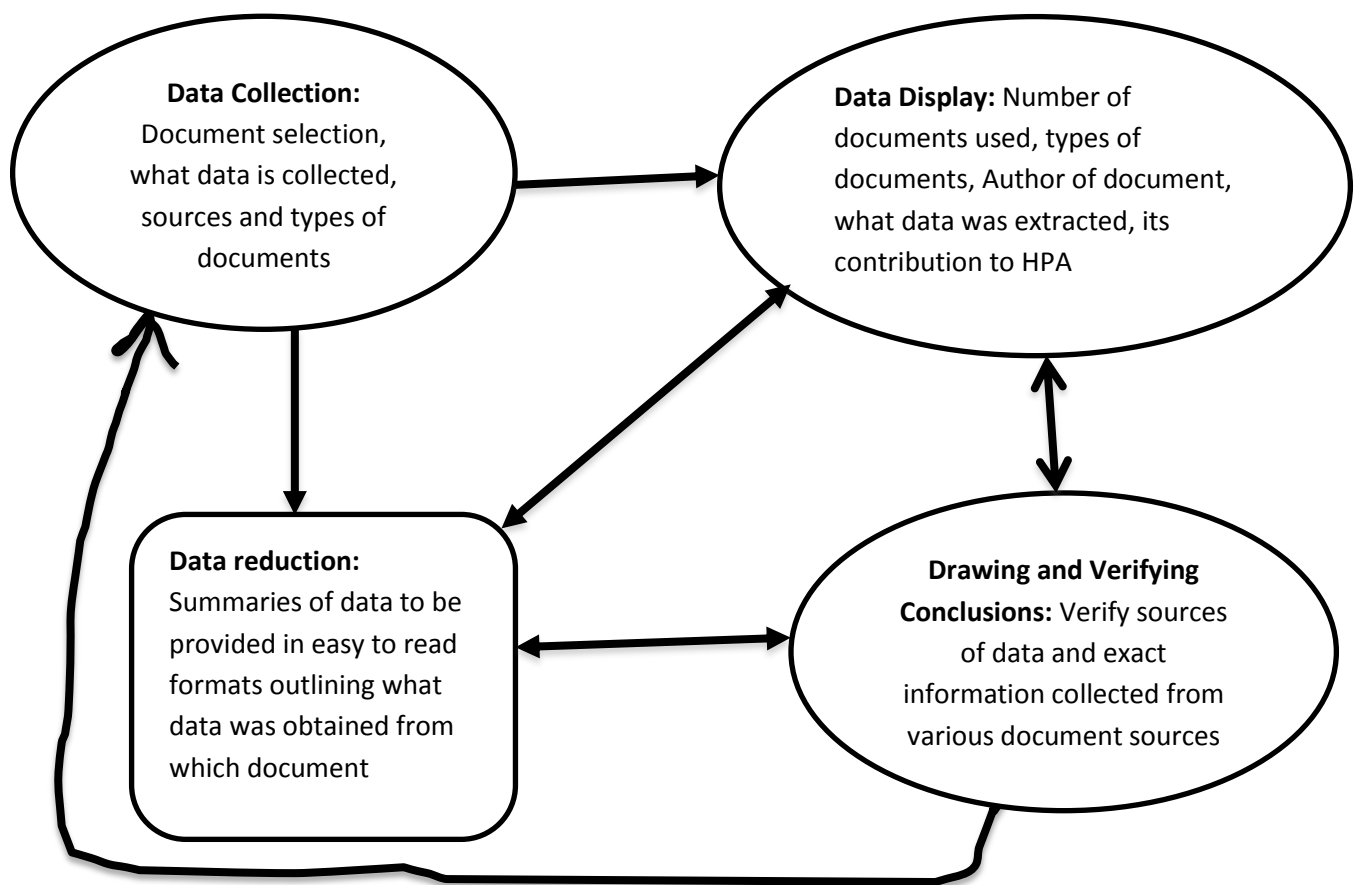
This study therefore aimed to explore the factors determining the adoption of document reviews as a data collection method in HPA studies among LMICs. As such, it focused on

identifying why and how document reviews are featured in HPA studies in LMICs. It further aimed at identifying the types of documents commonly used in HPA studies and how they relate to different foci of HPAs. All this facilitated the analysis of the most recent practices regarding the use of documents in informing HPA. It is the researcher's hope that this review will contribute to the growing body of methodological literature in the field of HPA and lead to the understanding of the value and application of document reviews in conducting policy analyses.

### **In reference to the interactive model**

Documents and the role of document reviews have been identified, but have not been fully explored for the ability to contribute to methodological diversity in HSR in the LMICs. Consequently, no conceptual framework has been formulated to guide the use of documents in HSR and HPA studies in particular. An interactive model in Figure 1 describes the process required of all qualitative researchers in the way they approach, process and present data (Miles & Huberman 1994). As document reviews fall under the broader rubric of qualitative research, adoption of the conceptual model has the potential to guide HPA researchers in the way they process their data obtained from documentary sources. The different components of the model include: data collection, data display, data reduction, drawing and verifying conclusions. The use of this model allows for order, structure and meaning to data collected from document sources (Ahmed 2010; Marshall & Rossman 1995). Indeed, the authors (Ahmed 2010; Marshall & Rossman 1995) have identified the existence of large volumes of data from documents in instances where researchers have applied document-based data collection methods whilst conducting HPA studies. This model is, therefore, useful in the way documentary data is collected, analysed and presented, as it facilitates the identification of crucial issues and events cited in the documents under use. It also promotes order and precision in the learnings obtained from the documents at times when document-based data is questioned by readers/consumers of the HPA study results.

**Figure 1: An Interactive Model**



**Adopted from Miles and Huberman (1994)**

From broader methodological HSR literature, sufficient description of methods conducted in HPA studies is not done adequately (Mills 2012). These result in poor quality studies getting published in LMICs. There is need to improve the way researchers approach and present their methodologies. Adopting the interactive model as demonstrated above could be the beginning of that improvement in document-based HSR as well as HPA studies.

## Methods

This systematic review was conducted to explore the empirical evidence of how documents are utilised in HPA. To consolidate the existing methodological and conceptual lessons of how documents have initially been used in conducting HPA in LMICs, the author used the Gilson and Raphaely (2008) database and looked at their literature review developed for the

period 1994-2007 and general literature on documentary research. This facilitated the shaping of the research questions as well as the themes of this review. Subsequently, a systematic review by use of an iterative search process to identify relevant articles was conducted. This ensured minimal effects of bias in the selection of articles and analysis of findings. No ethical considerations were raised in relation to this study as publicly available data was used.

## **Search strategy**

Nine electronic databases were explored to elicit articles for this review. Articles that focused on HPA in LMICs and where document reviews were part of the methodology were included. The electronic databases included Africa-wide Information, Soc Index, Cumulative Index of Nursing and Allied Health that were searched through EBSCoost, PubMed, Scopus, International Bibliography of Social Science and Web of Science. Keywords and Mesh terms for the review included 'document review', 'documentary research', 'health policy', 'policy analysis', 'document analysis' and 'low and middle-income countries'. To facilitate the removal of duplicates, all retrieved articles were transferred to a reference manager (EndNote X8).

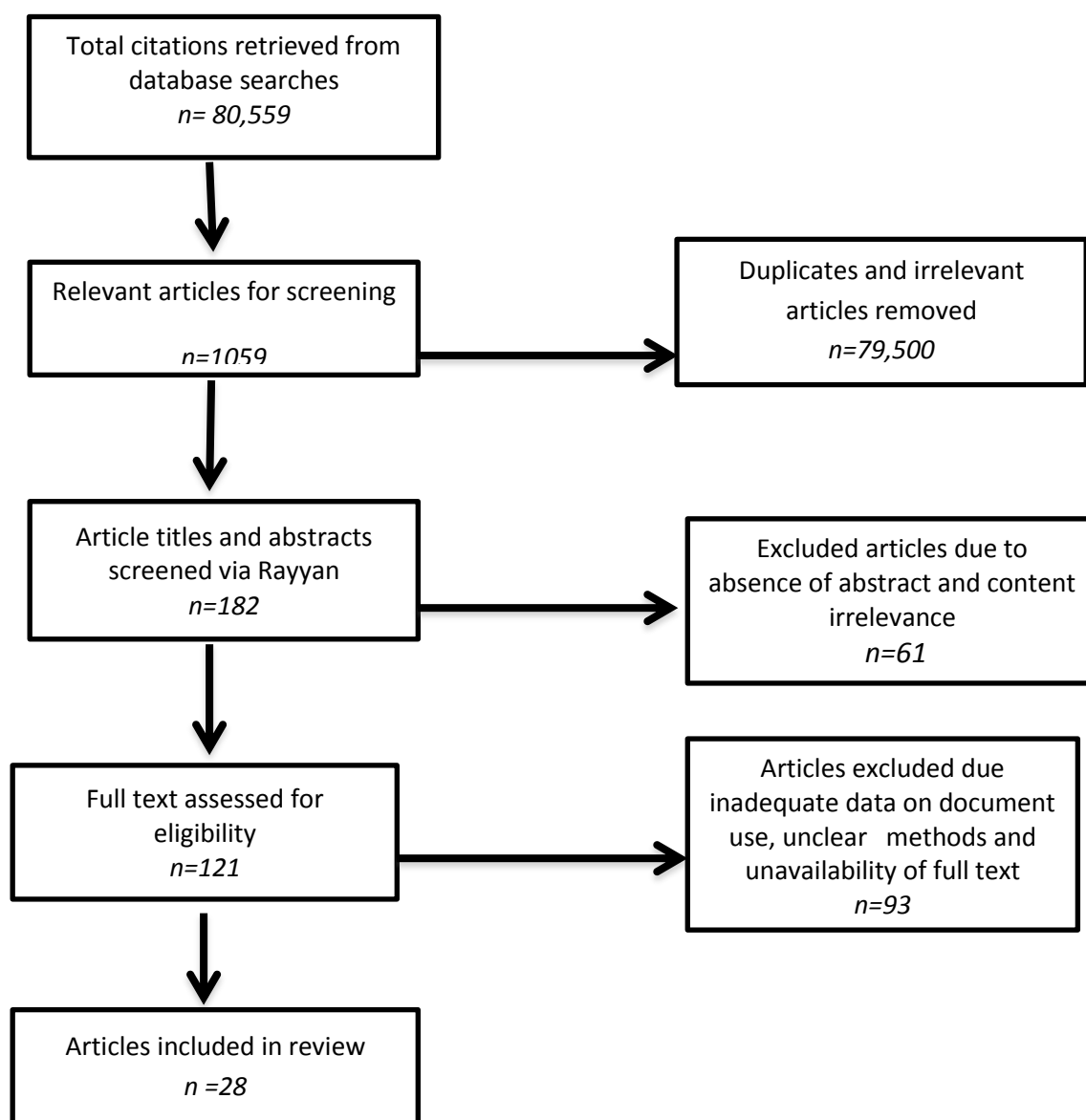
## **Article selection**

For an article to be included in this review it had to be an HPA study. Secondly, this study was limited to LMICs and therefore the articles included had to be studies conducted in this region. Thirdly, these policy analyses done in LMICs needed to have used document reviews as their independent or supplementary methods (thus a mixed method). Qualitative, quantitative, and mixed methods study designs were also considered as long as one of the data collection methods involved document review. Fourthly, only articles that were peer reviewed journal articles with accessible full free text were considered to facilitate data extraction. The search for these articles was limited to those published from 2008-2016, as an expansion of a methodological study done from the period 1994-2007. All the included articles were in English. The exclusion criteria were therefore: (1) all articles published in other languages other than English; (2) studies that were not policy analyses and conducted



outside of LMICs; (3) studies done prior to 2008 and after 2016 and whose methodology did not involve document reviews; and, (4) theses.

For easy identification of relevant articles, titles and abstracts were explored against the inclusion and exclusion criteria after the removal of duplicates. This was facilitated by a web application - RAYYAN which facilitated the quick screening of titles and abstracts by the researcher and supervisor as well as promoting transparency and unbiased selection of articles for inclusion. Finally, text reading with focus on the methodology and discussion on how documents contributed to the analysis was done for the selected articles.



**Figure 1: Search strategy PRISMA**

## **Quality review, data extraction and analysis**

Articles were assessed for their appropriateness by both the author and supervisor to reduce bias. This was done by looking at the articles' aims, study design, data collection methods employed in each study and study results in order to be able to pick out how the methodology contributed to study objectives and conclusions of the HPA studies.

The Critical Appraisal Skills Programme criteria in addition to the inclusion and exclusion criteria were used to identify suitable articles for the review (Public Health Resource Unit: Critical Appraisal Skills Programme (CASP) 2006). The programme guided the author in judging the quality of articles by looking at each article's method, relevance to the topic area, rigour and adequate data in the way documents were featured in the policy analysis study. This criterion was adjusted to fit the objectives of the review and poor-quality articles, based on this examination, were excluded from the review.

A data extraction form guided what information was gathered from each article for later analysis. The Miles and Huberman (1994) interaction model was used to guide the collection of data. The model directed the author to examine how the included articles demonstrated data collection, reduction, and display, verification of data and drawing of conclusions from documents used. Attention was paid to how studies directly and indirectly discussed the description of documents used (type and number of documents used in the study), sources of documents, factors facilitating the identification and access to documents, challenges in document use and the ultimate contribution of document to the policy analysis process. All this information facilitated the identification of the key findings as regards the role of documents in health policy analyses.

Coding of common concepts re-appearing in different articles was facilitated through line by line reading. This was done to identify all key words and most relevant concepts to documents' role in informing policy analysis studies. Inductive themes were generated based on the codes that originated whilst coding and developing the theses.

Data analysis followed the thematic analysis approach (Chinchilli VM 2007; Thomas J. and Harden A. 2008), whereby manual coding was done by the researcher and discussed with the supervisor before a final decision was made. Frequently emerging codes were organised

and grouped to generate themes, which enabled comparison across the articles that were included. Firstly, data was stratified into facilitators of document use in policy analysis studies and inhibitors of document use as two separate domains for easy analysis. From these domains originated the four themes; document authenticity, document accessibility, document contribution to HPA and facilitators of document identification, that were further looked into and analysed.

## **Results**

A total of 28 articles were included for full text reading and analysis for this review. Out of the 28 policy analysis studies, two were multi-country studies which took place across the following countries; Botswana, South Africa, Uganda, Zambia, Zimbabwe, Mozambique, Nicaragua, Vietnam, Mali and Kyrgyzstan. Based on region, the results show that 16 policy analysis studies which incorporated document reviews were done in Africa, nine in Asia (Vietnam, Thailand, Nepal, Mongolia and Bangladesh), two in North America (Mexico and New Mexico) and one from the Middle East (Iran).

Of the 28 HPA studies, 24 employed a mixed methods approach. Mixed methods in this instance refers to studies that incorporated document reviews with other methods such as FGDs, in-depth interviews, round table discussions, key informant interviews and semi-structured interviews. Four of the studies employed document reviews as a stand-alone data collection method, while the rest used a combination of several methods as indicated above.

With regard to types of documents, 27 out of 28 of the HPA studies used policy documents as their primary documentary sources while six out of 28 articles used a combination of media reports, mostly as newspaper articles, and policy documents as their source of document-based data. On another hand, six HPA studies indicated the use of letters and diaries for their policy analyses. Of the total 28 HPA studies, 13 based part of their analyses on research reports that ranged from grey literature to peer reviewed research papers.

With respect to focus of the policy analysis, seven of the HPA studies focused on implementation, eight on policy formulation (agenda setting), three on policy content and 11 on policy process, thus from policy formulation to implementation.

## **Major themes related to document review and health policy analysis**

Themes that arose throughout the review of the 28 articles were mainly around factors that determined whether adequate data was extracted from the documents and whether this extracted data made any significant contribution to the conclusions made about a particular health policy or not. Ultimately these factors were categorised into themes that spoke to document accessibility, document clarity and authenticity, as well as the contribution made by the documents when compared against other data collection methods. A further theme that emerged dwelt on the contribution that 'personal contact' played in the identification of and access to, documents used in the HPA process. The figures presented in parentheses indicate the number of articles where the mentioned themes were discussed at length.

Out of the 28 HPA studies, ( $n=10$ ) mentioned having had difficulties in accessing documents. Documents were either protected from public use, destroyed from fires, still in draft form and not yet ready for public use, or simply missing from expected designated sites. In instances where documents were available, ( $n=8$ ) HPA studies highlighted the lack of clarity of the data found in the documents and therefore questioned the authenticity of the documents used in the policy analysis. The lack of clarity was attributed to incomplete documents, illegibility of data collected by hand and in other languages other than English, as well as inconsistent and conflicting information found in documents. Most explicitly noted was the contribution that documents made (or did not make) towards HPA, as highlighted by the authors in the ( $n=19$ ) articles. Besides these themes, other themes that were deemed important, but not explicitly recognised by authors, included factors that facilitate the identification of documents used in the policy analysis ( $n=3$ ) and the shortfalls of using document reviews in HPAs ( $n=2$ ). As these were not discussed in great detail, these findings are discussed alongside the main themes stated above. The following sections present the key findings under the four main themes.

## **Document authenticity**

As highlighted by Abuya et al. (2012), basing a HPA solely on documents was not adequate due to various reasons. To begin with, the use of documents did not provide them with an in-depth understanding of all the events around the policy under evaluation. This was because the available documents lacked detail and did not give a full report of the policy process and views of stakeholders regarding the policy. In instances where a limited number of documents were retrieved, data was described as fragmented and leading to confusion of policy analysts, as data was vague and sometimes contradictory (Bertone et al. 2014). Similar to this finding, Doherty (2015) indicates that some documents were incomplete and affected researchers' conclusions about a particular policy.

Particularly interesting were the findings from the HPA studies that based their analyses on document reviews alone. Most of them indicated that one of the disadvantages of using a large volume of documents was that it was time consuming. Similarly, mixed methods studies that used a significant volume of documents found the exercise challenging due to the time it took to extract and apply the extracted data to their HPA study. Authors (Singh et al. 2010; Vuong et al. 2012), highlighted that even though documents were closely related to the policy, they contained a variation of contradicting information, thus making it hard for analysts to extract only the relevant data. An example of contradictory information among documents is given by Singh et al. (2010), who noted that the aim of the oral health policy in South Africa was stated differently in most related policy documents. Further contradictions were noted on the guidelines of how to conduct health assessments in school going children as part of the oral health policy. This confusion of varying document information and the need to integrate all this data so as to allow for sensible conclusions to be drawn, speaks to both authenticity and the notion of how much time document reviews consume.

## **Document accessibility**

Several articles indicated how failure to access policy-relevant documents hindered the basic understanding of policy processes; policy implementation or its failure (Beran et al. 2015; Dalglish et al. 2015; Nguyen et al. 2010b; Taegtmeier et al. 2011). While access to

documents is highly attributed to the nature of the document (private or personal documents), other factors such as natural disasters, which can cause the destruction of documents, and render them inaccessible, have been identified. An example is cited by Dalglish et al. (2015), whose study indicates how the few available documents failed to provide them with full details of the events preceding their HPA study, as most of the documents had been destroyed by a fire in one of the WHO Niger servers prior to the policy analysis. Apart from these above-mentioned factors, it was explicitly noted that in most HPA studies which used document reviews, documents were simply not always available, whether as hard copies or on websites, even when sites and other sources of document location were recommended by stakeholders (Nguyen et al. 2010a).

For those analysts that used document reviews as their sole source of data, the process of document selection has also been flagged as an obstruction to document access (Rawal et al. 2015). While a rigorous process in identifying quality documents to use for policy analysis purposes is important, this could lead to the loss of documents that have potential information relating to the policy process. In this HPA study, the author indicated that the exclusion of documents that did not contain specific search terms rendered the document inaccessible, despite containing significant information. Of greater importance was simply the absence of documents relating to the policy of interest, meaning that important facets of a policy process was simply not ever documented.

Whilst access may be interpreted as physical access, the author also noted failed access in instances where documents were available, but information being portrayed was not clear. Clarity resulting from language barriers or incoherent writing and display of information also rendered documents inaccessible. These are highlighted as inconsistencies in document content and incomplete recording of data, which led to vague, contradictory information and conclusions (Singh et al. 2010; Taegtmeier et al. 2011; Vuong et al. 2012).

### **Document contribution to HPA**

It is apparent that documents played a big role in the understanding of the background of most health policies analysed (Chimhutu et al. 2015; Colombini et al. 2016; Rodriguez et al. 2015). Specifically, authors (Belaid & Ridde 2012; Koduah et al. 2015) state that document

reviews had helped researchers better understand the history of the policy context in which it was implemented, the sequence of the events, as well as the identification of key stakeholders involved in particular policies.

Additionally, other authors described document reviews as being essential for the identification of gaps between policy formulation and implementation, as well as the actual state of the policy at the time of the analysis (Muga & Jenkins 2010; Taegtmeyer et al. 2011; Vuong et al. 2012). Document reviews have also been reported to assist with historical analysis of policy processes. Muga and Jenkins (2010), highlights the changing policy features from the documents related to the mental health policy with each era, indicating how stakeholders' tasks increased or decreased with each era, and how the policy was eventually turned into a generic policy, inappropriate for the country. Witter et al. (2016b), on the other hand, points out that the availability of documents within a specified timeframe could either reflect rapid activity around the policy being analysed or simply the unavailability of documents for the other years in question. For this article (Witter et al. 2016b), pre-policy documents were very hard to get and hence the lack of conclusiveness of how certain events impacted on the policy process that was analysed. As documents sometimes fail to offer all answers regarding to how or why certain events impact policy processes, Chimeddamba et al. (2015) asserts that policy processes are not always contained in a document. This was based on the observation that some of the policy omissions that are not documented, might be policy actions of some policy actors that deliberately did not carry out policy related tasks, a notion that exists in common knowledge around organisational and discretionary power and how it impedes policy implementation (Erasmus & Gilson 2008).

Another contribution made by documents was the validation of data gathered from respondents (Dalglish et al. 2015; Doshmangir et al. 2015; El-Jardali et al. 2014; Koduah et al. 2015). Document reviews helped analysts triangulate data, and to clarify and interpret meanings of technical terms used by stakeholders who were interviewed during other data collection sessions (interviews). Document reviews helped with the interpretation of technical terms used during interviews, FGDs or from other related documents such as media reports. Furthermore, document reviews helped verify statements and stated policy actions given by key policy informants during interviews and focus group discussions (FGDs)

as a way of gauging whether mentioned policy actions were actually being followed as stipulated in the policy documents.

Other important areas in which document reviews contributed to policy knowledge was their capacity to help analysts identify key policy facets to particular policies such as, challenges, cost effectiveness and position of stakeholders affected by particular policies (Yothasamut et al. 2010). Documents were also described as advocacy instruments around certain policies in instances where they were used to attract attention to policy makers. It was observed by Toure et al. (2012) that frequently referenced documents and their elements act as entry points for getting policy issues onto the agenda. This was observed in instances where a significant number of articles written on a policy issue got more attention from policy elites. It is further facilitated when these documents are made public to raise for awareness of the policy (Semansky et al. 2013).

### **Facilitators of document identification**

As mentioned in the methodology, the author was aware of emerging themes that could add insight into the role of document reviews in HPA. Inductively, the theme ‘facilitators of document identification’ was generated, as it added knowledge on how these documents, used in HPA, are identified, aside from the common online searches. With the challenges faced by some policy analysts in identifying documents, talking to stakeholders about potential sources of documents, yielded good results. It was highlighted by Rawal et al. (2015) that the number of documents included in their study increased exponentially with increased interaction with stakeholders during interviews and other interactive data collection methods. Where this did not happen automatically, authors (Watson-Jones et al. 2016; Witter et al. 2016b), indicate that the location of useful documents was identified through consultation with key policy people who facilitated the accessibility of such documents. Although it was not stated what role these stakeholders played in the policy processes being examined, their ability to identify, locate and facilitate access to relevant documents could be explained by the ‘insider advantage’. This is where stakeholders that are intimately involved in the policy process become well conversant with the system; are well informed of where and how to find all essential documents to support studies (Merriam et al. 2001).



## **Discussion: Identifying document contributions to HPAs, key findings and recommendations**

According to the author's knowledge, no other systematic review has been done around the use of documents and document reviews in HPA studies. This is, probably, the first of its kind, aimed at gathering and synthesising data on the role of document reviews in conducting HPAs among LMICs. The qualitative interactive model by Miles and Huberman (1994) was used as an approach for data extraction from relevant articles, with focus on how data was displayed and presented. Findings presented in this review are evidence of the importance and utility of documents in the HPA discipline, which has been noted in the learnings from general literature on the use of documents in HSR. The same has been noted from the findings in the review by Gilson and Raphaely (2008) regarding the way documentary researchers in LMICs approach and use documents. Key findings from this systematic review includes the benefits of document reviews in HPAs, the pitfalls of document reviews in HPAs, what HPA studies can achieve with the use of document reviews, what they cannot achieve and the methodological lessons for future HPA studies and researchers.

### **Benefits of using document reviews in HPA studies, enhancing the discipline of HPA**

This systematic review sought to identify why document reviews are constantly being employed in HPAs done in LMICs and mostly to identify how the use of documents enhances the discipline of HPA. In light of this, the review found some specific benefits of adopting document reviews in HPA studies which might have been mentioned in the broader literature but not specific to HPA studies.

To begin with, Payne and Payne (2004) have previously identified the use of documents in HPA as essential for categorising stakeholders, investigating and identifying limitations of other data sources. The applicability of this statement cannot be ignored in this review as document reviews have been noted to facilitate the validation of data collected from other data collection methods such as interviews. Triangulation mainly played out in the HPA

studies that combined document reviews and other data collection methods. Apart from matching the information from stakeholders and the information contained in the documents, HPA researchers also get the benefit of clarity in instances where time limitations force the interviewee to use jargons or abbreviated terms. In this instance, documents tend to be more detailed especially when explaining a process. As a consequence, document-based HPA researchers are protected from the impact of time constraints that may occur during rushed interviews or interruptions during interactive data collection methods. Not only that, but also the impact of resource constraints resulting from financial issues or unstable policy environments.

Having to analyse policies that are directly or indirectly linked to people's health issues or the politics around it, HPA researchers stand a risk of getting caught up amidst these circles especially when prospective HPA studies are conducted, as the HPA researcher is sometimes involved in the development of policies (Hambrick Jr 1998). The review has noted that in such instances, HPA researchers are protected from ethical breaches, particularly when all ethical considerations are taken into account. While it is easy to break ethical rules when using interactive data collection methods, HPA researchers using document reviews minimise these chances, especially with use of public documents (Green J. & Thorogood N. 2014; Tolley et al. 2016). Apart from individual benefits, the use of document reviews has always been known to assist with the identification of past mistakes and prevention of similar mistakes in future policies through constant referencing of documented procedures stipulated by past researchers (Gilson & Mills 1995) . For those whose focus was policy content, the use of documents allowed them to gauge the appropriateness of a policy in different eras and allowed them to make recommendations for better policies in the era of the HPA. It can be said therefore that documents allow for historical policy analysis.

### **Pitfalls of using document reviews in HPA studies**

HPA researchers have indicated that despite the consistent use of document reviews, they are faced with several challenges which have impacted on the outcomes of their HPA studies. For one, this review has revealed that HPA researchers stand the risk of losing data through mishandling of documents or through natural disasters such as fires. While this is

not highlighted in the general literature, an example is provided in this systematic review where a significant number of documents were lost in a fire when a WHO server burnt down in Niger (Dalglish et al. 2015). While this could happen with other data collection methods such as audio recorders in primary research, HPA researchers should be aware of this 'document specific' risk and possibility. These results suggest some deliberations that policy analysts should take note of and implies the different levels of attention and effort required of those adapting documents as an independent method. Whilst this finding does not aim to demotivate HPA researchers from adopting document review as an independent data collection method, it flags the risks that accompany document use and the level of watchfulness required therein.

Besides the mentioned risks, it is important to be aware of other challenges as regards access to documents (Love 2013; Yin 1994a). This review underscores the difficulties with using private and highly confidential documents. These can be personal or highly guarded politically-related documents, sometimes requiring passwords (Sixth & Murray, 2001). In these circumstances, HPA researchers have resorted to consulting with key informants to gain the necessary access as they are well aware of the systems and able to negotiate access to relevant documents. While this strategy has worked in other scenarios (Merriam et al. 2001), it is not a guarantee that it will always apply to all HPA studies, as it has implications for the individual providing access to the documents.

A key resource consideration is the time it takes to identify and obtain documents of interest, and this has to be incorporated in the research plan. The actual data extraction, where large volumes of documents have been obtained, is another challenge. While probing and other data collecting techniques can control the flow of information and facilitate the collection of only the pertinent information, this is not possible with document reviews. As indicated in the wider literature review, thematic and narrative analysis, usually employed as the analyses of choice, require meticulous reading (Chinchilli VM 2007; Thomas J. and Harden A. 2008). When large volumes are at play, it is the use of several document reviewers that can facilitate quicker data collection and minimise the impact of this challenge; but, there will be need to guard against potential conflict and bias.

## **What can HPA studies achieve with document reviews?**

Document reviews have been noted to have specific utility. In particular, it can facilitate the identification of gaps between policy intent, where these are clearly documented, and implemented. It can also affirm the current policy stance on a particular issue. It is through comprehensive line by line reading and comparison of documents included, that policy-level inconsistencies and lack of policy coordination are identified (Muga & Jenkins 2010). Although this can be confusing and time consuming, document reviews have revealed why some of the documented legal issues and strategies in policy documents are theoretically existent, but rarely implemented (Taegtmeyer et al. 2011). Other studies have been able to identify and recommend the need for governments to develop independent policies that address a specific health need rather than embedding new policies in umbrella policies, thus foregrounding specific policy problems and facilitate change in the health systems (Muga & Jenkins 2010). However, it is important for future analysts to be vigilant in the way they approach and handle documents, as this review has shown that it is not only a matter of accumulating a large number of documents, but rather the skill and ability to read between the lines, identify the discrepancies, being able to pick the strengths and the weaknesses of a policy and the risk it poses for the policy at hand, as well as the policy consumers.

In sync with findings by other authors regarding the role of documents in HSR (Asbridge 2004; Holder & Treno 1997), the review confirms their findings as it has identified documents' ability to indicate the amount of activity around a policy and the commitment of governments to meet a population's health needs. To an extent, this review also disagrees with these sentiments as it has revealed that the existence of documents on a particular policy may not only be an indication of other factors, missing documents from a war or natural disasters for example. This is a caveat to analysts as the availability of documents is now an indicator of either rapid activity around the policy being analysed or simply the unavailability of documents and not necessarily the lack of prioritisation of a policy issue by policy elites or the current government. Conversely, other articles highlight that the more documents are written on an issue, the more attention the issue gets from policymakers. In an attempt to assess the evolution of African Union policies related to women's and children's health, Toure et al. (2012) identified that documents act as

advocacy instruments, in that frequently referenced documents and their elements act as entry points for policy issues onto the agenda. Research reports and media reports that reveal disease trends and other health problems that need government attention have the ability to bring about undeniable evidence that can be referred to in deciding policy priorities. While this has not been put as a reason for conducting document reviews, in any of the literature reviewed, this can be defined as a basis for evidence-based policies through the identification and comprehensive referencing of documents related to a policy issue.

As found by Mogalakwe (2009), this review confirms that document reviews are mostly employed as supplementary data collection methods. While document reviews can be used as an independent data collection methods, most health policy analysts use them as complementary methods and this choice is linked to the aims of the policy analysis, accessibility of the documents, the quality of the documents and the perceived utility by the user. An example from this review is the link between choice of a document and policy foci where HPA studies looking at policy content are more likely to adopt document review as a sole data collection method than those focusing on policy implementation. Further to this, HPA studies focusing on policy formulation and implementation are noted to use more of document reviews in combination with interviews, focus group discussions among others. While this review cannot explain these links, it can assert that document reviews allow for the collection of data from areas that are practically difficult to reach. Through the use of secondary data found on websites, emails and other hard copy documents, the analysis of global and multi-country policies have been conducted. A note to future health policy analysts is to acknowledge and embrace document reviews as a viable option for collecting richer data especially when other data collection methods risk incomplete HPAs, individual's physical and psychological harm due to unstable policy environments.

### **What is impossible to achieve with document reviews?**

As much as it was not the intention of this review to compare and contrast primary data collection methods and secondary data collection methods, under which document reviews fall, it is almost inevitable to identify the aspects of primary data collection methods which are impossible to achieve with the use of document reviews while conducting HPA studies.

It is apparent that people and their surroundings evolve, making it hard for policy analysts to have a first-hand experience with the policy context (Atkinson & Coffey 2004; Hunter 2003). In confirmation, one study from this review testifies that not all information could be found in documents thus the void that comes with the use of documents in HPA. For this reason, health policy analysts are being encouraged to adopt other data collection methods other than document reviews to compensate for these bits and pieces of information that could only be collected from those that were intimately involved with the policy. It is worth noting though, that while document reviews adopted in retrospective HPA studies may only provide screenshots of certain points in the policy process, relying on primary data collection methods such as interviews with stakeholders also run a risk of recall bias, and, therefore, to be equally cautious when using both data collection methods. Indeed, this review has revealed that primary data collection methods allow for probing and immediate verification of information better than document reviews especially when retrospective HPAs are conducted. This has been demonstrated in the way a significant number of studies have highlighted the failure of documents to explain why and how certain events in the policy development process influenced the implementation of particular policies. Consequently, this speaks to validity of document-based HPAs as interpretation of data extracted is left to document users and runs the risk of being misinterpreted based on the user's preconceived mindset and interests (Judd et al. 1991; Weber 1990b).

Another aspect of document reviews worth noting, and earlier identified in the review by Gilson and Raphaley 2008, is that they do not adequately represent the study population due to a rigorous document selection process that sometimes leads to the exclusion of potentially rich documents. In view of this, Atkinson and Coffey (2004) recommends that health policy analysts adopting document reviews need to embrace documents for what they are, be diligent in the way they approach, use and interpret data from them taking into consideration all that these documents can and cannot provide during HPA studies.

## Methodological lessons

In the dearth of knowledge regarding the type of documents suitable for HPA studies, policy documents stood out as the most used documents in HPA studies. Although it is not overtly documented, policy documents can in this review be classified as the most preferred documents for informing HPA in LMICs. These are followed by research reports, which fall in line with the collective idea of evidence-based practice (Gilson & Mills 1995). In terms of accessibility, the level at which policy documents and research reports were used in this review indicate that they are the most publicly available documents and hence recommended for use in HPA studies.

As regards the management of barriers associated with the use of documents in HPA, this review emphasizes the need for policy analysts to recognize and acknowledge their limits when it comes to the selection of data collection methods and what they can offer. It also highlights the importance of consultation with people that are associated with the policy being analyzed, for the identification of documents. It can be said therefore that how documents are located, retrieved and used is dependent on whether policy elites are comfortable in sharing essential documents around policies. In reference to accessing highly guarded documents, policy analysts need to recognize that the growing interest in textual and audio-visual data from the internet to examine illness experiences, is posing challenges to researchers, especially when private information exists in a public domain. This is in regard to the required appropriate private protection with human subjects (Eastham 2011). It is advisable, therefore, that researchers using private documents should look for subtle distinctions of privacy inherent in available sources, such as passwords, to ensure the protection of privacy (Eastham 2011). Where these exist, Bruckman (2002) advises users of the document to seek informed consent. Conversely, researchers should look for indexed documents which can be searched in search engines and considered public sources of data. Where intentions to keep the document private are obvious, researchers must consider excluding the document from their data sources.

As for media reports, Jensen (2013) suggests that researchers should take account of the context in which a document is produced and used. In each case, the author advises

researchers to provide a descriptive account of what each media output piece contains in a manner that can be replicated by other researchers, taking into consideration the impact that this may have on the audience. Looking at the articles that were consulted from the media for their HPA, it is apparent that most of the studies done in LMICs fail to follow the above-mentioned pattern of presenting data from media reports. While most of the studies are able to describe the type of media reports, most do not give a description of what kind of media document informed their HPA. For those that are able to give a description of the media documents, they are not able to quantify the data, with very few being able to provide interpretations of the data and clarify implications and potential impact of the data obtained from these reports. According to this review, there is need for improvement in the way that media reports are presented, as not much is elicited from this review regarding the contribution by media reports, making it hard to isolate the exact impact they have on the policy-making process, how they represented policy consumers as well as policymakers.

The same practice was observed across the presentation of data collected from all types of documents. What was observed was that most of the articles pooled together data collected from documents and all other sources of data employed in their studies. This made it difficult to distinguish between the specific sources of data especially when a review is focused on specific data extracted from a specific data source. The author acknowledges that this might have affected the number of articles included in this study as pooled data undermined the significance of document use in most articles and were hence excluded from the review. Apart from this weakness in the use of documents in HPA studies, there are many other weaknesses in the way documents are motivated for needs to be addressed by future health policy analysts. These weaknesses, in summary, will require that analysts indicate their aims/reasons for employing document reviews, fully describe and quantify the types of documents used, indicate the appraisal and selection process and quality assessment used (if any), and display the exact data extracted from the documents in a disaggregated manner that allows for distinction of data collected from documents or other sources as well as the contribution made. This can further be extended to a brief mention of challenges faced with the use of certain types of documents with the aim of raising awareness of all these important aspects of documents to future health policy analysts



wishing to adopt this method. This could be enhanced by the use of a check-list to ensure the production of valid conclusions around a policy innovation (Bryman & Bell 2007). Bryman and Bell (2007) suggest that researchers should always check for the following: who produced the document, why it was produced, and whether the material is genuine and produced by someone who writes authoritatively and objectively on the subject. Again, it is emphasized to check if the events or accounts presented in the document can be corroborated by other evidence to ensure reliability of the field in which a document is based. This review reveals that amidst the rampant use of documents in HPA studies, not all users assess their documents against this checklist. This is evident in the small number of articles indicating to have assessed the quality of documents before use. While this assessment was not exactly as the one provided above, this review acknowledges that health policy analysts in LMICs examine the quality of documents by using more than one research team member to select documents and by use of a quality assessment tool. Granting that these are first steps to an improved practice, researchers conducting HPA studies can adopt the above-mentioned concepts as a guideline to improve the rigour in document-based HPA studies.

## **Limitations**

The author realises the potential for selection bias but is confident of its minimal effect on the review as the supervisor, who was also the second reviewer, was involved in the screening and selection on the reviewed articles. Additionally, a quality assessment tool adapted from CASP was used to ensure the minimal effect of selection bias. The inclusion of only studies published in English is also recognized as a limiting factor and recommends that future studies should consider the inclusion of articles published in other languages. Despite briefly looking at the focus of HPA studies, the review could not conclusively explain the relation between document type and focus of HPA as this was beyond the mandate of this review. Furthermore, due to time and resource constraints, the review was not able to construct a framework for the use of documents in HPA studies. More empirical studies looking specifically at the framework of how document reviews should be employed in HPA studies are, therefore, worth conducting as they would take into consideration most of the weaknesses that have been identified from this review.

## Conclusion

HPA researchers will always draw on documents. This review has provided a structured way of thinking about documents and document reviews as a data collection method in HPA studies. It elaborates which documents are suitable, for what purposes and how to think of document quality and utility.

It is evident from this review that document review are a laudable, scientifically sound methodology and that it has a significant role of contributing to the conclusions made about particular policies in evaluating their processes and gauging their current state within a given timeframe. HPA researchers should not underestimate the extent of skill required to adequately analyse documents and draw conclusions from these analyses. Documents are helpful to the policy analysis process and policy analysts should equip themselves accordingly for this kind of methodology and when they do embark on documentary reviews.

## **List of abbreviations**

LMIC low and middle-income country

HPA health policy analysis

HSR health systems research

WHO world health organisation

## **Competing Interests**

The author declares that there are no competing interests in this review.

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## **Author's Contribution**

Naomi Kayesa is responsible for the development of the study concept, design, data collection through database searches, data analysis, drafting and final write-up of this review.

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## Appendices

### Appendix 1: Characteristics of reviewed articles

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
4. Abuya et al. (2012)	Kenya	To describe the implementation process of the Kenyan output based approach (OBA) program and draw implications for scale up.	Document review and qualitative in-depth interviews	Implementation	Found that basing the analysis on documents may was not exorbitant of all details around events related to the policy since reports did not give full views of stakeholders.
16. Belaid and Ridde (2012)	Bukina Faso	To analyse perceptions of policy implementers throughout all stages of the policy implementation process.	Document reviews, interviews and non-participant observations and FGDs.	Implementation	Documents were screened and analysed to better understand the history of the policy and context in which it was implemented.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
21. Beran et al. (2015)	Multicountry (Kyrgyzstan, Mali, Mozambique, Nicaragua, Vietnam, and Zambia.)	To identify factors that influences the implementation of the policy by policy makers.	In-depth interviews, online questionnaire, and document reviews.	Implementation	Had difficulties accessing documents for the policy analysis and established that failure to access published work hinders the understanding of the impact of the policy implementation process.
22. Bertone et al. (2014)	Seirra Leon	To examine the trajectory and determinants of the policy in the post conflict policy environment.	Key informant interviews, stakeholder workshops and document reviews	Policy formulation.	Very little and fragmented documents leading contradictory and vague data found in available documents. However, the few documents found helped formulate preliminary hypotheses and illuminate on gaps from other data collection methods.



Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
28. Chimhutu et al. (2015)	Tanzania	To describe the policy process. A qualitative research designs.	In-depth interviews, observations and document reviews.	Policy formulation	Documents helped with providing background information to the study, define questions and trajectories pursued in the other data collection methods. Documents were also found to uncover the political frames surrounding the policy.
31. Colombini et al. (2016)	Nepal	To analyse the historical process of the policy.	Document analysis.	Policy formulation	Found that despite the provision of background, documents did not explain factors leading to contextual and political events leading to the policy.
33. Chimeddamba et al. (2015)	Mongolia	To evaluate the extent to which non-communicable diseases (NCD) policies are aligned with WHO NCD control	Document reviews.	Implementation/ policy formulation	Identified that policy processes are not always contained in a document; undocumented policy omissions are also policy actions/inaction. The chronological order of policy documents helped complement existing policy documents and made the policy more popular.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
34. Dalglish et al. (2015)	Niger	To explore the dimensions of power in health policy making.	Semi-structured interviews, document reviews and contextual analysis.	Implementation/policy formulation	Documents helped with validation of data from respondents, assisted with compiling of the policy's timeline and political context. However, most were unavailable due to the destruction of WHO-Niger servers by fire in 2007.
40. Doherty (2015)	Multicountry (Botswana, South Africa, Uganda, Zambia and Zimbabwe)	To identify major implementation problems with the policy and suggest strategies for better implementation.	Document review and interviews.	Implementation	Found that with incomplete documents, researcher's meet difficulties in making conclusions about a policy's events leading to its implementation.
44. Doshmangir et al. (2015)	Iran	To develop a policy map of the events leading to the milestones of the policy process.	Document reviews and interview	Implementation/policy formulation	Documents helped clarify different technical terms used by respondents and provided a rich source of information of how the policy entered onto the policy agenda.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
45. El-Jardali et al. (2014)	Lebanon	To generate insights about how policies are made.	Document reviews and key informant interviews.	Implementation/ policy formulation.	Documents identification was facilitated by interviews and media analysis which helped validate data from interviews and media outputs.
54. Juma et al. (2015)	Kenya	To analyse ICCM policy development and the decision-making criteria by policy makers.	Semi-structured interviews, document reviews	Policy formulation	Documents provided the timeline for policy development, policy content and processes. They also informed decisions on the policy and development of training guidelines.
57. Koduah et al. (2015)	Ghana	To understand how a policy attained political priority and sustained.	Document analysis, in-depth interviews and participant participation.	Policy formulation	Documents helped map and summarise the historical sequence of events, identifying and classifying policy actors. They also helped triangulate findings from other sources of data.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
74. Muga and Jenkins (2010)	Kenya	To examine the evolution of the mental health policy from 1965 to 1997.	Document reviews and interviews.	Policy content	Documents helped identify gaps between documented policy progress and actual state of policy by defining the country's general health policy and distinct historical periods of the current policy.
78. Nguyen et al. (2010a)	Vietnam	To analyse the medicine pricing policies.	Documentary analysis	Policy formulation	Though documents did not contain answers, they helped identify a reliable and systematic source of data for examining medicine prices applicable to developing countries.
81. Odoch et al. (2015)	Uganda	To explore the policy process of the introduction of a new policy.	Document reviews	Policy formulation and implementation	Newspaper articles, and other published reports minimised the effects of scarce meeting minutes containing data of the negotiations, formulation and policy implementation.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
91. Nguyen Ha et al. (2010)	Vietnam	To analyse the policy development and understand the obstacles to its implementation	Key informant interviews and document reviews.	Policy formulation and implementation.	Documents provided information on policy content changes, sometimes on the actors, but rarely on how and why these changes happened. Documents helped understand whether changes in one document led to changes in the subsequent policy documents.
92. Place et al. (2016)	Mexico	To examine policies regarding postnatal depression	Document reviews.	Policy content	Some policy documents were still in draft form and rendered the HPA inconclusive. A significant number of documents did not contain a specific search term and were excluded leading to loss of documents with potentially useful data about the policy.
94. Rawal et al. (2015)	Bangladesh	To aid in the development of appropriate rural retention in Bangladesh.	Interviews, round table discussions and document reviews.	Policy Implementation	Number of included documents increased based on consultation with policy key informants. They identified the need for regular revision of documents as data contained in the documents was old.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
97. Rodriguez et al. (2015)	Malawi	To explore the critical issues in the formulation and implementation of the policy.	Documentary review and in-depth interviews.	Policy formulation and implementation	Documents were used to draw out key events leading to the development of the policy as well as the role and experiences of policy implementers which echoed burn out and unresolved issues related to the policy.
98. Semansky et al. (2013)	New Mexico	To examine how the reform impacted the culturally competent services (CCS).	Surveys and document reviews.	Policy Implementation	Documents reviews revealed that for three years the policy was not revised or evaluated to assess the capacity to implement it or evaluate its progress.
100. Singh et al. (2010)	South Africa	To determine if oral health elements are coherent with the health policies of post-apartheid era.	Document reviews and interviews.	Policy content.	As there were many different and conflicting documents regarding the same policy, document reviews helped identify one policy document with clear statements on health promotion and oral health and the content therein.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
102. Taegtmeier et al. (2011)	Kenya	To examine the policy implications and analyse it against a specific framework.	Document reviews and in-depth interviews.	Policy formulation	Documents reviewed helped identify the absence of data recording with regards to policy's distinct events and justified why actions were not being implemented by policy makers.
105. Toure et al. (2012)	Multicountry (Benin, Chad, Ethiopia, Guinea, Mali, Niger, Swaziland and Togo)	To assess the evolution of African union policies related to women's and children's health.	Document review	Policy content and formulation	Found that highly referenced documents and elements acted as entry points for policy issues onto the agenda and sustained issues on the policy agenda. Documents also acted as advocacy instruments as the more articles were written on a policy issue the more attention it got from policy makers.

Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
109. Vuong et al. (2012)	Vietnam	To identify the factors that prompted the policy change and its impact on the people using the drug.	Document reviews	Policy formulation	Through document reviews, lack of policy coordination, inconsistencies between legal documents and their contents were identified and acted as evidence to why there was tension between stakeholders and why some policies were being implemented in segregation or failed.
110. Watson-Jones et al. (2016)	Tanzania	To explore the feasibility of the policy after introducing to existing policies.	Document reviews and interviews.	Policy formulation and implementation.	Documents were used to verify specific statements and actions in the policies reviewed. Documents reviews identified pertinent issues related to the policy integration onto the larger health services interventions such as financial and human resources limitations.



Author(s) and Year of Publication	Country of study	Aim of study	Data collection methods	Focus of study	Findings
116. Witter et al. (2016b)	Sierra Leon	To analyse and document the effects of the free health care Initiatives on health workers.	Document reviews and key informant interviews.	Policy formulation and implementation.	Official documents helped track down the changes to health workers' incentives in the post-conflict era, set the changes brought by the policy and highlight the current situation and challenges faced by policy implementers.
118. Yothasamut et al. (2010)	Thailand	To analyse the process and factors that drove the policy innovation.	In-depth interviews and document reviews.	Policy formulation	Documents helped researchers identify key features of the policy; challenges, cost effectiveness and positions of stakeholders affected by the policy.

## Appendix 2: Excluded articles

Author and year of publication	Total score out of 6 Number of articles (n)	Reason for exclusion
Abhicharttibutra et al. (2014), Agyepong et al. (2016), Abuya et al. (2015), Chimphamba Gombachika et al. (2013), Banchani and Tenkorang (2014), Bennett et al. (2014), Brijnath (2008), Bukachi et al. (2014), Cliff et al. (2010), Chilundo et al. (2015), Deconinck et al. (2016), Ditlopo et al. (2013), Faraji et al. (2015), Grundy et al. (2009), Haidari et al. (2014), Hoe et al. (2016), Ir et al. (2010), Kwamie et al. (2014), Ma et al. (2015), Maluka et al. (2011), Mbachu et al. (2016), Mensah et al. (2016), Nabyonga-Orem et al. (2014b), Nabyonga-Orem et al. (2014a), Nnaji et al. (2010), Onoka et al. (2015), Ridde et al. (2011), Tantivess and Gill (2008), (Tran et al. 2013), Vargas et al. (2015), Waweru et al. (2016), Witter et al. (2010), Witter et al. (2011), (Zulu et al. 2015), Bemelmans et al. (2016)	4 (35)	This category of articles was excluded due to several reasons. Even though the articles gave a good description of documents used in their analysis in the methodology section, there was no further detail on what kind of data was extracted from the documents and what contribution they made to the analysis. There was no information on the process of documents selection.

Author and year of publication	Total score out of 6 Number of articles (n)	Reason for exclusion
<p>Abihiro and McIntyre (2013), Atuoye et al. (2016), Azétsop and Ochieng (2015), Abel et al. (2011), Bennett et al. (2013), Bakari and Frumence (2013), Bigdeli et al. (2013a), Bigdeli et al. (2013b), Bocoum et al. (2013), Colombini et al. (2012), Daly et al. (2016), Damari and Riazi-Isfahani (2016), Daniels et al. (2011), Moreira and O'Dwyer (2013), Draper et al. (2014), Grundy et al. (2014), Hadisoemarto et al. (2016), Jain and Jadhav (2008), Junko et al. (2015), Koduah et al. (2015), Le Loup et al. (2009), Lee et al. (2009), Machado et al. (2011), Machado et al. (2014), Anyona and Courten (2014), Maseko et al. (2015), Midori et al. (2015), Moat and Abelson (2011), Zulu et al. (2013), Njau et al. (2013), Olivier (2016), Omar et al. (2010), Onoka et al. (2015), Opwora et al. (2010), Oronje (2013), Palmer and Storeng (2016), Patcharanarumol et al. (2013), Purohit et al. (2016), Sheikh and Uplekar (2016), Smith (2014), Takian et al. (2013), Vargas and Muiser (2013), Williams et al. (2009), Witter et al. (2016a), Hamed et al. (2016)</p>	<p>3 (46)</p>	<p>In addition to all the reasons in the above category, the articles in this category had shortfall in their methodology sections. Methodology was too short, besides mentioning the use of documents; these documents were not described or quantified. Apart from mentioning the use of documents in the methods sections, no other reference was made to documents throughout the article and rendered the article less useful</p>

Author and year of publication	Total score out of 6 Number of articles (n)	Reason for exclusion
Albert and Porter (2015), Ancker and Rechel (2015), Asante et al. (2012), Bazzyar et al. (2016), Basaza et al. (2013), Silva and Barraclough (2009), Kumar et al. (2014), Lapping et al. (2012), Moshiri et al. (2016), Pelletier et al. (2012), Rechel et al. (2010),	2-0 (12)	Besides the reasons in both categories above, these articles had unclear objectives and barely mentioned documents despite indicating the use of documents in their abstracts. Some did not accessible full text and some turned out to be policy briefs rather than actual health policy analyses.

## **Appendix 3: Instructions for authors: Health Policy and Planning**

### **Information for authors**

Health Policy and Planning improves the design, implementation and evaluation of health policies in low- and middle-income countries through providing a forum for publishing high quality research and original ideas, for an audience of policy and public health researchers and practitioners. HPP is published 10 times a year. HPP has a double-blinded peer-review policy. All types of papers are peer reviewed and all article abstracts from each issue are translated into French, Spanish and Chinese.

Before you submit please make sure you have followed all the relevant instructions. A checklist for authors is available [here](#).

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Corresponding author's name, address, telephone/fax numbers and e-mail address

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